# **Bureau of Prisons Health Services** Clinical Encounter

Inmate Name: ORENA, VICTOR 07540-085 Reg #:

Date of Birth: 08/04/1934 Sex: М Race: WHITE Facility: DEV Encounter Date: 03/10/2025 11:32 Provider: Churchville, Lawrence MD N<sub>0</sub>2 Unit:

Reviewed Health Status: Yes

Physician - Follow up Visit encounter performed at Housing Unit.

**SUBJECTIVE:** 

COMPLAINT 1 Provider: Churchville, Lawrence MD

Chief Complaint: CARDIAC

Subjective: Heart failure with hypokalemia II loop diuretic

Pain: Not Applicable

Allergies:

<u>Allergy</u> Reaction **Comments** 

Intolerance-other **RXN UNKNOWN Topamax** 

Allergies list reviewed/updated for the presence or absence of allergies, sensitivities, and other reactions to drugs, materials, food and environmental factors with the patient on 03/10/2025 11:32 by Churchville, Lawrence MD

### **OBJECTIVE:**

### **ROS Comments**

CHF

### **ASSESSMENT:**

Cardiomyopathy, I429 - Current

Other heart failure, I5089 - Current

PLAN:

#### **Renew Medication Orders:**

Rx# Medication **Order Date** 675204-DEV Potassium Chloride 20 mEq ER Tab UD 03/10/2025 11:32

> Take one tablet (20 MEQ) by mouth each day x 180 day(s) Pill Line Only Prescriber Order:

Indication: Hypertension, Benign Essential, Cardiomyopathy, Other heart failure

### Disposition:

Follow-up at Sick Call as Needed

Follow-up at Chronic Care Clinic as Needed

Other:

Heart failure

### **Patient Education Topics:**

<u>Date Initiated</u> Format Handout/Topic Provider Outcome Churchville, Lawrence Verbalizes Compliance - Treatment 03/10/2025 Counseling Understanding

Date of Birth: 08/04/1934 Sex: M Race: WHITE Facility: DEV Encounter Date: 03/10/2025 11:32 Provider: Churchville, Lawrence MD Unit: N02

Copay Required: No Cosign Required: No

Telephone/Verbal Order: No

Completed by Churchville, Lawrence MD on 03/10/2025 11:38

## Bureau of Prisons Health Services Clinical Encounter

Inmate Name: ORENA, VICTOR Reg #: 07540-085

Date of Birth: 08/04/1934 Sex: M Race: WHITE Facility: DEV Encounter Date: 03/10/2025 10:51 Provider: Fandreyer, F. FNP Unit: N02

Reviewed Health Status: Yes

Advanced Practice Provider - Evaluation encounter performed at Housing Unit.

**SUBJECTIVE:** 

COMPLAINT 1 Provider: Fandreyer, F. FNP

Chief Complaint: Skin Problem

Subjective: 89 year old MDU. PMH: Alzheimer's type dementia, complete heart block pacemaker

dependent (battery replaced 4/11/2022), aortic aneurysm, HFrEF, hyperlipidemia,

hypertension, DMII, OA bilateral knees, hemorrhoids, tinea cruris, latent TB, polyneuropathy,

coronary artery disease with stents, CKD and glaucoma

He is seen for companion report of rash on his back. He asks how he got a rash. Has no

complaint of itching.

Pain: No

Allergies:

<u>Allergy</u> <u>Reaction</u> <u>Comments</u>

Topamax Intolerance-other RXN UNKNOWN

Allergies list reviewed/updated for the presence or absence of allergies, sensitivities, and other reactions to drugs, materials, food and environmental factors with the patient on 03/10/2025 10:51 by Fandreyer, F. FNP

#### **OBJECTIVE:**

### **Exam Comments**

General: Alert, eating

Pulm: speech clear in full sentences Musculoskeletal: sitting in wheelchair

skin: erythematous maculopapular rash over entire torso. No indication for scratching. No open areas or drainage.

### ASSESSMENT:

Acute cough, R051 - Resolved

Pneumonia, unspecified organism, J189 - Resolved

Rash and other nonspecific skin eruption, R21 - Current

Unsp symptoms and signs involving the genitourinary system, R399 - Resolved

Unspecified bacterial pneumonia, J159 - Resolved

Unspecified hemorrhoids, K649 - Resolved

PLAN:

**New Medication Orders:** 

Rx# Medication Order Date

Triamcinolone 0.1% Cream 03/10/2025 10:51

<u>Prescriber Order:</u> small amount Topically - Two Times a Day x 14 day(s) -- please apply to

affected areas of torse

Date of Birth: 08/04/1934 Sex: M Race: WHITE Facility: DEV Encounter Date: 03/10/2025 10:51 Provider: Fandreyer, F. FNP Unit: N02

**New Medication Orders:** 

Rx# Medication Order Date

Indication: Rash and other nonspecific skin eruption

Famotidine Tablet 03/10/2025 10:51

**Prescriber Order:** 20 mg Orally - Two Times a Day x 30 day(s)

Indication: Rash and other nonspecific skin eruption

diphenhydrAMINE Capsule/Tablet 03/10/2025 10:51

Prescriber Order: 50 mg Orally at bedtime x 14 day(s) Pill Line Only

Indication: Rash and other nonspecific skin eruption

Non-Formulary was created for this drug

**New Non-Medication Orders:** 

OrderFrequencyDurationDetailsOrdered BySkin CheckDaily7 daysPlease check rash on torso. IfFandreyer, F. FNP

open areas or drainage develops or worsening lesions, please alert

provider.

Order Date: 03/10/2025

Disposition:

Follow-up at Sick Call as Needed

Other:

rash: no new detergent, lotion, food. will order triamcinolone, famotidine, benadryl.

**Patient Education Topics:** 

Date InitiatedFormatHandout/TopicProviderOutcome03/10/2025CounselingDiagnosisFandreyer, F.Needs

Reinforcement

Copay Required: No Cosign Required: No

Telephone/Verbal Order: No

Completed by Fandreyer, F. FNP on 03/10/2025 11:12

# **Bureau of Prisons Health Services**

### **Clinical Encounter - Administrative Note**

Inmate Name: ORENA, VICTOR Reg #: 07540-085

Date of Birth: 08/04/1934 Race: WHITE Facility: DEV Sex: Μ N02 Note Date: 03/10/2025 06:46 Provider: Mcclurken, Mark RN Unit:

Reviewed Health Status: No

Admin Note - General Administrative Note encounter performed at Housing Unit.

**Administrative Notes:** 

ADMINISTRATIVE NOTE 1 Provider: Mcclurken, Mark RN

AIC received Potassium 20mEq as ordered, order needs clarification, will receive dosing till 3/11, stop date of

original order.

Copay Required: No Cosign Required: No

Telephone/Verbal Order: No

Completed by Mcclurken, Mark RN on 03/10/2025 06:46

# **Bureau of Prisons Health Services**

### **Clinical Encounter - Administrative Note**

Inmate Name: ORENA, VICTOR Reg #: 07540-085

Date of Birth: 08/04/1934 Race: WHITE Facility: DEV Sex: Μ N02 Note Date: 03/09/2025 06:14 Provider: Mcclurken, Mark RN Unit:

Reviewed Health Status: No

Admin Note - General Administrative Note encounter performed at Housing Unit.

**Administrative Notes:** 

ADMINISTRATIVE NOTE 1 Provider: Mcclurken, Mark RN

AIC received Potassium 20mEq as ordered, order needs clarification, will receive dosing till 3/11, stop date of

original order.

Copay Required: No Cosign Required: No

Telephone/Verbal Order: No

Completed by Mcclurken, Mark RN on 03/09/2025 06:16

# Bureau of Prisons Health Services

### **Clinical Encounter - Administrative Note**

Inmate Name: ORENA, VICTOR Reg #: 07540-085

Date of Birth: 08/04/1934 Sex: M Race: WHITE Facility: DEV Note Date: 03/05/2025 13:22 Provider: Montanez-Gonzalez, Unit: N02

Reviewed Health Status: Yes

Flowsheet Note - Treatment Follow up encounter performed at Housing Unit.

**Administrative Notes:** 

ADMINISTRATIVE NOTE 1 Provider: Montanez-Gonzalez, Islem RN

Treatment completed on ORENA, VICTOR, register number 07540-085

Type: Skin Check

Provider: Montanez-Gonzalez, Islem RN

Date: 03/05/2025 13:08

Comments: Small open area 1.5 cm x 2 cm on right elbow. He had a Mepilex on from the OSH with a scant

amount of bloody drainage. Wound clean with NS and new Mepilex applied. No s/s of infection.

Allergies:

Allergy Reaction Comments

Topamax Intolerance-other RXN UNKNOWN

Allergies list reviewed/updated for the presence or absence of allergies, sensitivities, and other reactions to drugs,

materials, food and environmental factors on 03/05/2025 13:22 by Montanez-Gonzalez, Islem RN

Copay Required: No Cosign Required: No

Telephone/Verbal Order: No

Completed by Montanez-Gonzalez, Islem RN on 03/05/2025 13:24

Requested to be reviewed by Goudreau, S. (MOUD) PA-C.

Review documentation will be displayed on the following page.

# Bureau of Prisons Health Services Clinical Encounter - Administrative Note

Inmate Name: ORENA, VICTOR Reg #: 07540-085

Date of Birth: 08/04/1934 Sex: M Race: WHITE Facility: DEV Note Date: 03/05/2025 06:50 Provider: Mcclurken, Mark RN Unit: N02

Reviewed Health Status: No

Admin Note - General Administrative Note encounter performed at Housing Unit.

**Administrative Notes:** 

ADMINISTRATIVE NOTE 1 Provider: Mcclurken, Mark RN

AIC received Potassium 20mEq as ordered, unable to sign off in BEMR, not showing up

Copay Required: No Cosign Required: No

Telephone/Verbal Order: No

Completed by Mcclurken, Mark RN on 03/05/2025 06:51

# Bureau of Prisons Health Services Clinical Encounter - Administrative Note

Inmate Name: ORENA, VICTOR Reg #: 07540-085 Date of Birth: 08/04/1934 Race: WHITE Facility: **DEV** Sex: Μ N02 Note Date: 03/04/2025 14:18 Provider: Procaccini, Sherri RN Unit:

Reviewed Health Status: No

Admin Note - General Administrative Note encounter performed at Housing Unit.

**Administrative Notes:** 

ADMINISTRATIVE NOTE 1 Provider: Procaccini, Sherri RN

Started back on Tamsulosin, will d/c NMOS order

**Discontinued Non-Medication Orders:** 

**Order Frequency Duration Details Ordered By** Goudreau, S. (MOUD) Nursing Intervention Daily 30 days Tamsulosin discontinued on 2/4/25 due to orthostatic PA-C symptoms and hypotension. Please alert medical team if patient having issues with urinary retention.

Discontinue Reason: No longer indicated

Order Date: 02/04/2025 End Date: 03/06/2025

Copay Required: No Cosign Required: No

Telephone/Verbal Order: No

Completed by Procaccini, Sherri RN on 03/04/2025 14:24

## Bureau of Prisons Health Services Clinical Encounter

Inmate Name: ORENA, VICTOR Reg #: 07540-085

Date of Birth: 08/04/1934 Sex: M Race: WHITE Facility: DEV Encounter Date: 03/04/2025 12:06 Provider: Churchville, Lawrence MD Unit: N02

Reviewed Health Status: Yes

Physician - Medical Trip Return encounter performed at Housing Unit.

SUBJECTIVE:

COMPLAINT 1 Provider: Churchville, Lawrence MD

Chief Complaint: Medical Trip Return

Subjective: Date of admission: 2/27/2025 Leominster Hospital

2/28/2025 Henry Heywood Hospital

Date of discharge: 3/3/2025

Reason for admission: Dyspnea

Discharge diagnosis: Acute respiratory failure

Acute systolic heart failure Diabetes Mellitus Type II

Orena, Victor 07540-085 Mr. Orena is an 89 year old MDU resident with no PRD who arrived at FMC Devens on 11/18/2015 with a past medical history significant for Alzheimer's type dementia, complete heart block pacemaker dependent (battery replaced 4/11/2022),aortic aneurysm, HFrEF, hyperlipidemia, hypertension, DMII, OA bilateral knees, hemorrhoids, tinea cruris, latent TB, polyneuropathy, coronary artery disease with stents, CKD and glaucoma..

On 2/27/2025, he was sent to the ER because of dyspnea. He was found to be in heart failure with elevated BNP (4300), troponin and CO2 retention. He was transferred to Henry Heywood Hospital the next day because of Custody issues.

He was aggressively diuresed with benefit. Imaging revealed bilateral pleural effusion right

>left

He was discharged beck to FMC Devens on 3/3/2025.

Pain: Not Applicable

Allergies:

<u>Allergy</u> <u>Reaction</u> <u>Comments</u>

Topamax Intolerance-other RXN UNKNOWN

Allergies list reviewed/updated for the presence or absence of allergies, sensitivities, and other reactions to drugs, materials, food and environmental factors with the patient on 03/04/2025 12:06 by Churchville, Lawrence MD

**OBJECTIVE:** 

**Temperature:** 

<u>Date Time Fahrenheit Celsius Location Provider</u>

Pulse:

<u>Date Time Rate Per Minute Location Rhythm Provider</u>

03/04/2025 05:40 DEV 90 Via Machine Mcclurken, Mark RN

**Respirations:** 

<u>Date Time Rate Per Minute Provider</u>

Date of Birth: 08/04/1934 Sex: M Race: WHITE Facility: DEV Encounter Date: 03/04/2025 12:06 Provider: Churchville, Lawrence MD Unit: N02

<u>Date</u> <u>Time</u> <u>Rate Per Minute</u> <u>Provider</u>

03/04/2025 05:40 DEV 30 Mcclurken, Mark RN

**Blood Pressure:** 

<u>Date Time Value Location Position Cuff Size Provider</u>

03/04/2025 05:40 DEV 137/78 Left Arm Sitting Adult-large Mcclurken, Mark RN

SaO2:

<u>Date Time Value(%) Air Provider</u>

**ROS Comments** 

Dyspnea improved

**Exam Comments** 

Awake alert. No visible dyspnea or tachypnea. AE decreased at the right base. Rales + at the left base.

**ASSESSMENT:** 

Cardiomyopathy, I429 - Current

Presence of cardiac pacemaker, Z950 - Current

Diabetes mellitus, type II (adult-onset), 250.00 - Current

PLAN:

Medication Reconciliation.

The patient's known medication list including OTC items was compiled and compared to new and changed BOP orders.

**New Medication Orders:** 

Rx# Medication Order Date

Tamsulosin HCl Capsule 03/04/2025 12:06

<u>Prescriber Order:</u> 0.4 mg Orally - daily x 180 day(s) Indication: Benign localized hyperplasia of prostate NOS

**Renew Medication Orders:** 

<u>Rx#</u> <u>Medication</u> <u>Order Date</u>

675115-DEV Acetaminophen 325 MG Tab UD 03/04/2025 12:06

<u>Prescriber Order:</u> Take two tablets (650 MG) by mouth three times daily x 180 day(s) Pill Line

Only

Indication: Osteoarthrosis, generalized

675116-DEV Aspirin 81 MG EC Tab UD 03/04/2025 12:06

Prescriber Order: Take one tablet (81 MG) by mouth each day x 180 day(s) Pill Line Only

Indication: Non-ST elevation (NSTEMI) myocardial infarction

675117-DEV Atorvastatin 20 MG TAB UD 03/04/2025 12:06

**Prescriber Order:** Take one tablet (20 MG) by mouth each evening for control of cholesterol x

365 day(s) Pill Line Only

Indication: Hyperlipidemia, mixed

675118-DEV Bisacodyl E.C. 5 MG TAB UD 03/04/2025 12:06

<u>Prescriber Order:</u> Take one tablet (5 MG) by mouth each day AS NEEDED for constipation

PRN x 180 day(s) Pill Line Only

Indication: Constipation, unspecified

Date of Birth: 08/04/1934 Sex: M Race: WHITE Facility: DEV Encounter Date: 03/04/2025 12:06 Provider: Churchville, Lawrence MD Unit: N02

**Renew Medication Orders:** 

Rx# Medication Order Date

675119-DEV Cholecalciferol (Vit D) 50,000 UNIT (1.25

mg)Cap

Prescriber Order: Take one capsule by mouth once a month on the first of the month x 180

day(s) Pill Line Only

Indication: Vitamin D deficiency

674483-DEV Clopidogrel Bisulfate 75 MG Tab UD

03/04/2025 12:06

03/04/2025 12:06

<u>Prescriber Order:</u> Take one tablet (75 MG) by mouth daily x 365 day(s) Pill Line Only

Indication: Non-ST elevation (NSTEMI) myocardial infarction

675121-DEV Cromolyn OPHTH Solution 4%, 10ML

03/04/2025 12:06

Prescriber Order: Place 2 drops in both eyes four times daily x 180 day(s) Pill Line Only

Indication: Allergic rhinitis

675122-DEV Docusate Sodium 100 MG Cap UD

03/04/2025 12:06

Prescriber Order: Take one capsule (100 MG) by mouth twice daily AS NEEDED for hard or

infrequent stools - Take with a glassful of water PRN x 180 day(s) Pill Line

Only

Indication: Constipation, unspecified, Unspecified hemorrhoids

675123-DEV Donepezil HCL 5 MG Tab UD

03/04/2025 12:06

**Prescriber Order:** Take one tablet (5 MG) by mouth each morning x 180 day(s) Pill Line Only

Indication: Mild cognitive impairment, so stated

675124-DEV Dorzolamide-Timolol Opht Soln 22.3-

03/04/2025 12:06

6.8mg/ml 10ML

<u>Prescriber Order:</u> Place 1 drop in both eyes twice daily x 180 day(s) Pill Line Only

Indication: Chronic angle-closure glaucoma

675125-DEV Ferrous Gluconate 324 MG Tab UD

03/04/2025 12:06

<u>Prescriber Order:</u> Take one tablet by mouth three times a week on Monday, Wednesday, and

Friday on empty stomach x 180 day(s) Pill Line Only

Indication: Anemia, unspecified

675126-DEV Furosemide 40 MG Tab UD

03/04/2025 12:06

Prescriber Order: Take one tablet (40 MG) by mouth twice daily morning and at noon \*Do not

give if systolic blood pressure <100 x 180 day(s) Pill Line Only

Indication: Other heart failure

675127-DEV Glucose 4 GM Tab

03/04/2025 12:06

<u>Prescriber Order:</u> Chew and swallow 4 tablets (16 GM) by mouth AS NEEDED for

hypoglycemia and alert medical PRN x 180 day(s) Pill Line Only

Indication: Diabetes mellitus, type II (adult-onset)

675130-DEV Insulin NPH (10 ML) 100 UNITS/ML INJ

03/04/2025 12:06

<u>Prescriber Order:</u> Inject 22 units of NPH insulin subcutaneously each morning x 365 day(s) Pill

Line Only

Indication: Diabetes mellitus, type II (adult-onset)

675129-DEV Insulin NPH (10 ML) 100 UNITS/ML INJ

03/04/2025 12:06

Prescriber Order: Inject 22 units of NPH insulin subcutaneously each evening x 365 day(s) Pill

08/04/1934 Race: WHITE Facility: DEV Date of Birth: Sex: М Encounter Date: 03/04/2025 12:06 Provider: Churchville, Lawrence MD Unit: N<sub>0</sub>2

**Renew Medication Orders:** 

Rx# **Medication Order Date** 

Line Only

Indication: Diabetes mellitus, type II (adult-onset)

Insulin Reg (10 ML) 100 UNITS/ML Inj 675132-DEV 03/04/2025 12:06

> Inject 8 units of regular insulin subcutaneously each evening x 365 day(s) Pill **Prescriber Order:**

Line Only

Indication: Diabetes mellitus, type II (adult-onset)

675131-DEV Insulin Reg (10 ML) 100 UNITS/ML Inj 03/04/2025 12:06

> Inject 8 units of regular insulin subcutaneously each morning x 365 day(s) **Prescriber Order:**

Pill Line Only

Indication: Diabetes mellitus, type II (adult-onset)

675133-DEV Latanoprost Ophth Soln 0.005% [2.5ml] 03/04/2025 12:06

> Place 1 drop in both eyes each evening x 180 day(s) Pill Line Only **Prescriber Order:**

Indication: Chronic angle-closure glaucoma

675134-DEV Memantine 10 MG Tab 03/04/2025 12:06

> Take one tablet (10 MG) by mouth twice daily x 180 day(s) Pill Line Only Prescriber Order:

Indication: Mild cognitive impairment, so stated

675135-DEV Nystatin Powder 100,000 UNIT/GM [30 GM] 03/04/2025 12:06

> Apply topically to the affected area(s) three times daily (inguinal/groin, **Prescriber Order:**

pannus) \*\*non-formulary approved until: 4/2/25 x 14 day(s) Pill Line Only

Indication: Tinea cruris

675144-DEV Spironolactone 25 MG Tab UD 03/04/2025 12:06

> Take one-half (1/2) tablet (12.5 MG) by mouth each day x 365 day(s) Pill **Prescriber Order:**

> > Line Only

Indication: Hypertension, Benign Essential, Atrioventricular block, complete

**Discontinued Medication Orders:** 

Rx# Medication **Order Date** 03/04/2025 12:06

675204-DEV Potassium Chloride 20 mEg ER Tab UD

Take one tablet (20 MEQ) by mouth each day **Prescriber Order:** 

Discontinue Type: When Pharmacy Processes Discontinue Reason: Duplicate Therapy

Indication:

Clopidogrel Bisulfate 75 MG Tab UD 03/04/2025 12:06

Take one tablet (75 MG) by mouth daily x 30 day(s) Pill Line Only Prescriber Order:

When Pharmacy Processes Discontinue Type:

Discontinue Reason: Duplicate Therapy

Indication:

**Reconciled Medications:** 

Source Action **Type** Rx# Medication **Order Detail** 

**BOP** Take two tablets (650 MG) by Continue Rx 675115-DEV Acetaminophen 325 MG Tab UD

mouth three times daily

Date of Birth: 08/04/1934 Sex: M Race: WHITE Facility: DEV Encounter Date: 03/04/2025 12:06 Provider: Churchville, Lawrence MD Unit: N02

Source	<u>Action</u>	<u>Type</u>	Rx#	<u>Medication</u>	Order Detail
ВОР	Continue	Rx	675116-DEV	Aspirin 81 MG EC Tab UD	Take one tablet (81 MG) by mouth each day
ВОР	Continue	Rx	675117-DEV	Atorvastatin 20 MG TAB UD	Take one tablet (20 MG) by mouth each evening for control of cholesterol
ВОР	Continue	Rx	675118-DEV	Bisacodyl E.C. 5 MG TAB UD	Take one tablet (5 MG) by mouth each day AS NEEDED for constipation
ВОР	Continue	Rx	675119-DEV	Cholecalciferol (Vit D) 50,000 UNIT (1.25 mg)Cap	Take one capsule by mouth once a month on the first of the month
BOP	Continue	Rx	675120-DEV	Citalopram 10 MG Tab UD	Take one tablet (10 MG) by mouth every night at bedtime
BOP	Continue	Rx	674483-DEV	Clopidogrel Bisulfate 75 MG Tab UD	Take one tablet (75 MG) by mouth daily
BOP	Discontinue	Rx	Order	Clopidogrel Tablet	
	Discontinu	e Reason: D	Suplicate Therap	у	
BOP	Continue	Rx	675121-DEV	Cromolyn OPHTH Solution 4%, 10ML	Place 2 drops in both eyes four times daily
ВОР	Continue	Rx	675122-DEV	Docusate Sodium 100 MG Cap UD	Take one capsule (100 MG) by mouth twice daily AS NEEDED for hard or infrequent stools - Take with a glassful of water
BOP	Continue	Rx	675123-DEV	Donepezil HCL 5 MG Tab UD	Take one tablet (5 MG) by mouth each morning
BOP	Continue	Rx	675124-DEV	Dorzolamide-Timolol Opht Soln 22.3-6.8mg/ml 10ML	Place 1 drop in both eyes twice daily
ВОР	Continue	Rx	675125-DEV	Ferrous Gluconate 324 MG Tab UD	Take one tablet by mouth three times a week on Monday, Wednesday, and Friday on empty stomach
ВОР	Continue	Rx	675126-DEV	Furosemide 40 MG Tab UD	Take one tablet (40 MG) by mouth twice daily morning and at noon *Do not give if systolic blood pressure <100
ВОР	Continue	Rx	675127-DEV	Glucose 4 GM Tab	Chew and swallow 4 tablets (16 GM) by mouth AS NEEDED for hypoglycemia and alert medical
ВОР	Continue	Rx	675128-DEV	guaiFENesin ER Tab 12 Hr 600 MG UD	Take one tablet (600 MG) by mouth twice daily AS NEEDED for secretions related to for cough **non-formulary approved until: 3/8/25
BOP	Continue	Rx	675130-DEV	Insulin NPH (10 ML) 100 UNITS/ML INJ	Inject 22 units of NPH insulin subcutaneously each morning
ВОР	Continue	Rx	675129-DEV	Insulin NPH (10 ML) 100 UNITS/ML INJ	Inject 22 units of NPH insulin subcutaneously each evening
ВОР	Continue	Rx	675132-DEV	Insulin Reg (10 ML) 100 UNITS/ML Inj	Inject 8 units of regular insulin subcutaneously each evening
ВОР	Continue	Rx	675131-DEV	Insulin Reg (10 ML) 100 UNITS/ML Inj	Inject 8 units of regular insulin subcutaneously each morning
BOP	Continue	Rx	675133-DEV	Latanoprost Ophth Soln 0.005% [2.5ml]	Place 1 drop in both eyes each evening
BOP	Continue	Rx	675134-DEV	Memantine 10 MG Tab	Take one tablet (10 MG) by mouth twice daily

Inmate Name: ORENA, VICTOR Reg #: 07540-085

Date of Birth: 08/04/1934 Sex: M Race: WHITE Facility: DEV

Encounter Date: 03/04/2025 12:06 Provider: Churchville, Lawrence MD Unit: N02

<u>Source</u>	<u>Action</u>	<u>Type</u>	Rx#	<u>Medication</u>	Order Detail	
ВОР	Continue	Rx	675135-DEV	Nystatin Powder 100,000 UNIT/GM [30 GM]	Apply topically to the affected area(s) three times daily (inguinal/groin, pannus) **nonformulary approved until: 4/2/25	
BOP	Discontinue	Rx	675204-DEV	Potassium Chloride 20 mEq ER Tab UD	Take one tablet (20 MEQ) by mouth each day	
Discontinue Reason: Duplicate Therapy						
BOP	Continue	Rx	671137-DEV	risperiDONE 0.5 MG Tab UD	Take one tablet (0.5 MG) by mouth each day AS NEEDED for agitation	
BOP	Continue	Rx	Order	risperiDONE Oral Tablet		
ВОР	Continue	Rx	675144-DEV	Spironolactone 25 MG Tab UD	Take one-half (1/2) tablet (12.5 MG) by mouth each day	
ВОР	Continue	Rx	675145-DEV	traZODone HCI 50 MG Tab UD	Take one tablet (50 MG) by mouth at bedtime AS NEEDED for agitation	
		OTC		No known OTCs		

### **New Laboratory Requests:**

New Laboratory Nequests.			
<u>Details</u> Lab Tests - Short List-General-Basic Metabolic Profile (BMP)	<u>Frequency</u> Recurring	<u>Due Date</u> 03/11/2025 00:00	<u>Priority</u> Routine
Lab results requested to be notified to:  Lab results requested to be notified to:	Adams, Samantha FNP Fandreyer, F. FNP		
Lab Tests - Short List-General-Basic Metabolic Profile (BMP)	Recurring	04/01/2025 00:00	Routine
Lab results requested to be notified to: Lab results requested to be notified to:	Adams, Samantha FNP Fandreyer, F. FNP		
Lab Tests - Short List-General-Basic Metabolic Profile (BMP)	Recurring	04/15/2025 00:00	Routine
Lab results requested to be notified to: Lab results requested to be notified to:	Adams, Samantha FNP Fandreyer, F. FNP		
Lab Tests - Short List-General-Basic Metabolic Profile (BMP)	Recurring	04/08/2025 00:00	Routine
Lab results requested to be notified to:  Lab results requested to be notified to:	Adams, Samantha FNP Fandreyer, F. FNP		
Lab Tests - Short List-General-Basic Metabolic Profile (BMP)	Recurring	04/29/2025 00:00	Routine
Lab results requested to be notified to:  Lab results requested to be notified to:	Adams, Samantha FNP Fandreyer, F. FNP		
Lab Tests - Short List-General-Basic Metabolic Profile (BMP)	Recurring	04/22/2025 00:00	Routine
Lab results requested to be notified to:  Lab results requested to be notified to:	Adams, Samantha FNP Fandreyer, F. FNP		
Lab Tests - Short List-General-Basic Metabolic Profile (BMP)	Recurring	03/25/2025 00:00	Routine
Lab results requested to be notified to: Lab results requested to be notified to:	Adams, Samantha FNP Fandreyer, F. FNP		
Lab Tests - Short List-General-Basic Metabolic Profile (BMP)	Recurring	03/18/2025 00:00	Routine
Lab results requested to be notified to: Lab results requested to be notified to:	Adams, Samantha FNP Fandreyer, F. FNP		
Generated 03/04/2025 12:44 by Churchville, Lawrence MD	Bureau of Prisons - DEV		Р

Race: WHITE Facility: DEV Date of Birth: 08/04/1934 Sex: Μ Encounter Date: 03/04/2025 12:06 Provider: Churchville, Lawrence MD Unit: N<sub>0</sub>2

**New Radiology Request Orders:** 

**Details Frequency End Date Due Date Priority** General Radiology-Chest-2 Views 03/10/2025 One Time Routine

Specific reason(s) for request (Complaints and findings):

CHF

Disposition:

Follow-up at Sick Call as Needed Follow-up at Chronic Care Clinic as Needed

Other:

CHF: Continue diuresis

Pleural effusion DM good control

Hypokalemia: Continue supplementation.

**Patient Education Topics:** 

<u>Date Initiated</u> Format Handout/Topic Provider Outcome 03/04/2025

None/Severe Cogn Impair Churchville, Lawrence No Evidence of

Learning

Copay Required: No Cosign Required: No

Telephone/Verbal Order: No

Completed by Churchville, Lawrence MD on 03/04/2025 12:44

Requested to be reviewed by Adams, Samantha FNP.

Review documentation will be displayed on the following page.

# Bureau of Prisons Health Services Cosign/Review

Inmate Name:ORENA, VICTORReg #:07540-085Date of Birth:08/04/1934Sex:MRace:WHITEEncounter Date:03/04/2025 12:06Provider:Churchville, LawrenceFacility:DEV

Reviewed by Adams, Samantha FNP on 03/04/2025 14:21.

# Bureau of Prisons Health Services Clinical Encounter - Administrative Note

Inmate Name: ORENA, VICTOR Reg #: 07540-085

Date of Birth: 08/04/1934 Sex: M Race: WHITE Facility: DEV Note Date: 03/04/2025 11:28 Provider: Quill, P. (MOUD) NP Unit: N02

Reviewed Health Status: No

Review Note - Report Review encounter performed at Health Services.

**Administrative Notes:** 

ADMINISTRATIVE NOTE 1 Provider: Quill, P. (MOUD) NP

Patient returned from OSH overnight following recent admission for CHF exacerbation. He will need follow up

with PCPT team today. Note forwarded to provider.

Copay Required: No Cosign Required: No

Telephone/Verbal Order: No

Completed by Quill, P. (MOUD) NP on 03/04/2025 11:31 Requested to be reviewed by Goudreau, S. (MOUD) PA-C. Review documentation will be displayed on the following page.

# Bureau of Prisons Health Services Clinical Encounter - Administrative Note

Inmate Name: ORENA, VICTOR Reg #: 07540-085

Date of Birth: 08/04/1934 Sex: M Race: WHITE Facility: DEV Note Date: 03/04/2025 10:46 Provider: Procaccini, Sherri RN Unit: N02

Reviewed Health Status: No

Admin Note - General Administrative Note encounter performed at Housing Unit.

**Administrative Notes:** 

ADMINISTRATIVE NOTE 1 Provider: Procaccini, Sherri RN

Given 1st dose of Potassium Chloride 20 meq, unable to add to MAR.

Copay Required: No Cosign Required: No

Telephone/Verbal Order: No

Completed by Procaccini, Sherri RN on 03/04/2025 10:53

### Bureau of Prisons Health Services

### Clinical Encounter - Administrative Note

Inmate Name: ORENA, VICTOR Reg #: 07540-085

Date of Birth: 08/04/1934 Sex: M Race:WHITE Facility: DEV Note Date: 03/04/2025 10:13 Provider: Procaccini, Sherri RN Unit: N02

Reviewed Health Status: No

Admin Note - General Administrative Note encounter performed at Health Services.

**Administrative Notes:** 

ADMINISTRATIVE NOTE 1 Provider: Procaccini, Sherri RN

Per MD. Order Labs and meds

**New Medication Orders:** 

Rx# Medication Order Date

Potassium Chloride ER Tablet (Klor-Con) 03/04/2025 10:13

**Prescriber Order:** 20 meq Orally - daily x 7 day(s) Pill Line Only

Indication: Hypertension, Benign Essential

Start Now: Yes

Night Stock Rx#:

Source: Pyxis

Admin Method: Pill Line Stop Date: 03/11/2025 10:12

MAR Label: 20 meq Orally - daily x 7 day(s) Pill Line Only

One Time Dose Given: No

**New Laboratory Requests:** 

DetailsFrequencyDue DatePriorityLab Tests - Short List-General-Basic MetabolicOne Time03/04/2025 00:00Stat

Profile (BMP)

Lab personnel verbally notified of a priority order of Today or Stat

Lab Tests - Short List-General-Basic Metabolic One Time 03/05/2025 08:00 Routine

Profile (BMP)

Copay Required: No Cosign Required: Yes

Telephone/Verbal Order: Yes By: Churchville, Lawrence MD

Telephone or Verbal order read back and verified.

Completed by Procaccini, Sherri RN on 03/04/2025 10:18

Requested to be cosigned by Churchville, Lawrence MD.

Cosign documentation will be displayed on the following page.

# Bureau of Prisons Health Services Cosign/Review

Inmate Name:ORENA, VICTORReg #:07540-085Date of Birth:08/04/1934Sex:MRace:WHITEEncounter Date:03/04/2025 10:13Provider:Procaccini, Sherri RNFacility:DEV

Cosigned by Churchville, Lawrence MD on 03/04/2025 15:45.

# Bureau of Prisons Health Services Clinical Encounter

Inmate Name: ORENA, VICTOR Reg #: 07540-085

Date of Birth: 08/04/1934 Sex: M Race: WHITE Facility: DEV Encounter Date: 03/04/2025 05:38 Provider: Mcclurken, Mark RN Unit: N02

Reviewed Health Status: Yes

Nursing - Evaluation encounter performed at Housing Unit.

**SUBJECTIVE:** 

COMPLAINT 1 Provider: Mcclurken, Mark RN
Chief Complaint: PULMONARY/RESPIRATORY

Subjective: "I feel sick, this water keeps coming out of my mouth, what's wrong with me"

Pain: No

Allergies:

Allergy Reaction Comments

Topamax Intolerance-other RXN UNKNOWN

Allergies list reviewed/updated for the presence or absence of allergies, sensitivities, and other reactions to drugs, materials, food and environmental factors with the patient on 03/04/2025 05:38 by Mcclurken, Mark RN

**OBJECTIVE:** 

Temperature:

<u>Date Time Fahrenheit Celsius Location Provider</u>

03/04/2025 05:40 DEV 98.0 36.7 Forehead Mcclurken, Mark RN

03/03/2025 19:35 DEV 97.4 36.3 Babineau, William RN

Pulse:

<u>Date Time Rate Per Minute Location Rhythm Provider</u>

03/04/2025 05:40 DEV 90 Via Machine Mcclurken, Mark RN

03/03/2025 19:35 DEV 84 Babineau, William RN

**Respirations:** 

Date Time Rate Per Minute Provider

03/04/2025 05:40 DEV 30 Mcclurken, Mark RN

03/03/2025 19:35 DEV 16 Babineau, William RN

**Blood Pressure:** 

<u>Date Time Value Location Position Cuff Size Provider</u>

03/04/2025 05:40 DEV 137/78 Left Arm Sitting Adult-large Mcclurken, Mark RN

03/03/2025 19:35 DEV 132/79 Babineau, William RN

SaO2:

<u>Date</u> <u>Time</u> <u>Value(%)</u> <u>Air</u> <u>Provider</u>

03/04/2025 05:40 DEV 94 Oxygen 4 L Mcclurken, Mark RN 03/03/2025 19:35 DEV 93 Oxygen 4 L Babineau, William RN

Date of Birth: 08/04/1934 Sex: M Race: WHITE Facility: DEV Encounter Date: 03/04/2025 05:38 Provider: Mcclurken, Mark RN Unit: N02

#### Comments

AIC in and out of bed throughout the night, c/o feeling sick, coughing up phlegm throughout the night. Nasal cannula remained on throughout the night, O2 at 4L. Complaints of feeling weak noted during the night.

Crackles noted to bilateral lung fields, left great than the right at this time.

#### **ASSESSMENT:**

Alteration in comfort r/t CHF/PNA

PLAN:

Disposition:

To be Evaluated by Provider

**Patient Education Topics:** 

Date InitiatedFormatHandout/TopicProviderOutcome03/04/2025CounselingCompliance - TreatmentMcclurken, MarkVerbalizes<br/>Understanding

Discussed importance of getting sleep in bed/keeping nasal cannula on

Copay Required: No Cosign Required: Yes

Telephone/Verbal Order: No

Completed by Mcclurken, Mark RN on 03/04/2025 05:45

Requested to be cosigned by Goudreau, S. (MOUD) PA-C.

Cosign documentation will be displayed on the following page.

Requested to be reviewed by Churchville, Lawrence MD.

Review documentation will be displayed on the following page.

# Bureau of Prisons Health Services Cosign/Review

Inmate Name:ORENA, VICTORReg #:07540-085Date of Birth:08/04/1934Sex:MRace:WHITEEncounter Date:03/04/2025 05:38Provider:Mcclurken, Mark RNFacility:DEV

Reviewed by Churchville, Lawrence MD on 03/06/2025 15:38.

# Bureau of Prisons Health Services Clinical Encounter

Inmate Name: ORENA, VICTOR Reg #: 07540-085

Date of Birth: 08/04/1934 Sex: M Race: WHITE Facility: DEV Encounter Date: 03/03/2025 19:34 Provider: Babineau, William RN Unit: N02

Reviewed Health Status: Yes

Nursing - Medical Trip Return encounter performed at Housing Unit.

**SUBJECTIVE:** 

COMPLAINT 1 Provider: Babineau, William RN

Chief Complaint: No Complaint(s)

Subjective: Inmate stated "I'm glad to be back. I hate that place."

Pain: No

Allergies:

Allergy Reaction Comments

Topamax Intolerance-other RXN UNKNOWN

Allergies list reviewed/updated for the presence or absence of allergies, sensitivities, and other reactions to drugs, materials, food and environmental factors with the patient on 03/03/2025 19:34 by Babineau, William RN

**OBJECTIVE:** 

Temperature:

<u>Date Time Fahrenheit Celsius Location Provider</u>

03/03/2025 19:35 DEV 97.4 36.3 Babineau, William RN

Pulse:

<u>Date Time Rate Per Minute Location Rhythm Provider</u>

03/03/2025 19:35 DEV 84 Babineau, William RN

**Respirations:** 

<u>Date</u> <u>Time</u> <u>Rate Per Minute Provider</u>

03/03/2025 19:35 DEV 16 Babineau, William RN

**Blood Pressure:** 

Date Time <u>Value Location</u> <u>Position</u> <u>Cuff Size</u> <u>Provider</u>

03/03/2025 19:35 DEV 132/79 Babineau, William RN

SaO2:

<u>Date</u> <u>Time</u> <u>Value(%) Air</u> <u>Provider</u>

03/03/2025 19:35 DEV 93 Oxygen 4 L Babineau, William RN

**Exam Comments** 

Inmate returned from Heywood hospital s/p CHF exacerbation. Inmate VSS O2 sat at 93% on 4L via nasal canula. Inmate had no complaints. No medication changes other D/C of antibiotics.

MDO notified

Plan of care

Date of Birth: 08/04/1934 Sex: M Race: WHITE Facility: DEV Encounter Date: 03/03/2025 19:34 Provider: Babineau, William RN Unit: N02

notify provider with any acute changes to inmate

to be seen for follow up in the AM

### **ASSESSMENT:**

No Significant Findings/No Apparent Distress

### PLAN:

Medication Reconciliation.

The patient's known medication list including OTC items was compiled and compared to new and changed BOP orders.

### **Renew Medication Orders:**

Rx# Medication Order Date

674478-DEV Acetaminophen 325 MG Tab UD

03/03/2025 19:34

<u>Prescriber Order:</u> Take two tablets (650 MG) by mouth three times daily x 30 day(s) Pill Line

Only

Indication: Osteoarthrosis, generalized

Start Now: Yes

Night Stock Rx#:

Source: Pyxis

Admin Method: Pill Line Stop Date: 04/02/2025 19:33

MAR Label: Take two tablets (650 MG) by mouth three times daily x 30 day(s) Pill Line Only

One Time Dose Given: No

674479-DEV Aspirin 81 MG EC Tab UD

03/03/2025 19:34

Prescriber Order: Take one tablet (81 MG) by mouth each day x 30 day(s) Pill Line Only

Indication: Non-ST elevation (NSTEMI) myocardial infarction

Start Now: Yes

Night Stock Rx#:

Source: Pyxis

Admin Method: Pill Line Stop Date: 04/02/2025 19:33

MAR Label: Take one tablet (81 MG) by mouth each day x 30 day(s) Pill Line Only

One Time Dose Given: No

674480-DEV Atorvastatin 20 MG TAB UD

03/03/2025 19:34

**Prescriber Order:** Take one tablet (20 MG) by mouth each evening for control of cholesterol x

30 day(s) Pill Line Only

Indication: Hyperlipidemia, mixed

Start Now: Yes

Night Stock Rx#:

Source: Pyxis

Admin Method: Pill Line Stop Date: 04/02/2025 19:33

MAR Label: Take one tablet (20 MG) by mouth each evening for control of cholesterol x 30

day(s) Pill Line Only

Date of Birth: 08/04/1934 Sex: M Race: WHITE Facility: DEV Encounter Date: 03/03/2025 19:34 Provider: Babineau, William RN Unit: N02

**Renew Medication Orders:** 

Rx# Medication Order Date

One Time Dose Given: No

674481-DEV Bisacodyl E.C. 5 MG TAB UD

03/03/2025 19:34

Prescriber Order: Take one tablet (5 MG) by mouth each day AS NEEDED for constipation

PRN x 30 day(s) Pill Line Only

Indication: Constipation, unspecified

Start Now: Yes

Night Stock Rx#:

Source: Pyxis

Admin Method: Pill Line Stop Date: 04/02/2025 19:33

MAR Label: Take one tablet (5 MG) by mouth each day AS NEEDED for constipation PRN x 30

day(s) Pill Line Only

One Time Dose Given: No

674482-DEV Cholecalciferol (Vit D) 50,000 UNIT (1.25

03/03/2025 19:34

mg)Cap

**Prescriber Order:** Take one capsule by mouth once a month on the first of the month x 30

day(s) Pill Line Only

Indication: Vitamin D deficiency

671075-DEV Citalopram 10 MG Tab UD

03/03/2025 19:34

Prescriber Order: Take one tablet (10 MG) by mouth every night at bedtime x 30 day(s) Pill

Line Only

Indication: Unspecified dementia with behavioral disturbance

Start Now: Yes

Night Stock Rx#:

Source: Pyxis

Admin Method: Pill Line Stop Date: 04/02/2025 19:33

MAR Label: Take one tablet (10 MG) by mouth every night at bedtime x 30 day(s) Pill Line Only

One Time Dose Given: No

674483-DEV Clopidogrel Bisulfate 75 MG Tab UD

03/03/2025 19:34

**Prescriber Order:** Take one tablet (75 MG) by mouth daily x 30 day(s) Pill Line Only

Indication: Non-ST elevation (NSTEMI) myocardial infarction

Start Now: Yes
Night Stock Rx#:
Source: Pyxis

Admin Method: Pill Line Stop Date: 04/02/2025 19:33

MAR Label: Take one tablet (75 MG) by mouth daily x 30 day(s) Pill Line Only

One Time Dose Given: No

674484-DEV Cromolyn OPHTH Solution 4%, 10ML

03/03/2025 19:34

**Prescriber Order:** Place 2 drops in both eyes four times daily x 30 day(s) Pill Line Only

Date of Birth: 08/04/1934 Sex: M Race: WHITE Facility: DEV
Encounter Date: 03/03/2025 19:34 Provider: Babineau, William RN Unit: N02

### **Renew Medication Orders:**

Rx# Medication Order Date

Indication: Allergic rhinitis

Start Now: Yes

Night Stock Rx#: Source: Pyxis

Admin Method: Pill Line Stop Date: 04/02/2025 19:33

MAR Label: Place 2 drops in both eyes four times daily x 30 day(s) Pill Line Only

One Time Dose Given: No

674485-DEV Docusate Sodium 100 MG Cap UD

03/03/2025 19:34

<u>Prescriber Order:</u> Take one capsule (100 MG) by mouth twice daily AS NEEDED for hard or

infrequent stools - Take with a glassful of water PRN x 30 day(s) Pill Line

Only

Indication: Constipation, unspecified, Unspecified hemorrhoids

Start Now: Yes

Night Stock Rx#:

Source: Pyxis

Admin Method: Pill Line Stop Date: 04/02/2025 19:33

MAR Label: Take one capsule (100 MG) by mouth twice daily AS NEEDED for hard or

infrequent stools - Take with a glassful of water PRN x 30 day(s) Pill Line Only

One Time Dose Given: No

671060-DEV Donepezil HCL 5 MG Tab UD

03/03/2025 19:34

**Prescriber Order:** Take one tablet (5 MG) by mouth each morning x 30 day(s) Pill Line Only

Indication: Mild cognitive impairment, so stated

Start Now: Yes

Night Stock Rx#:

Source: Pyxis

Admin Method: Pill Line Stop Date: 04/02/2025 19:33

MAR Label: Take one tablet (5 MG) by mouth each morning x 30 day(s) Pill Line Only

One Time Dose Given: No

674486-DEV Dorzolamide-Timolol Opht Soln 22.3-

03/03/2025 19:34

6.8mg/ml 10ML

**Prescriber Order:** Place 1 drop in both eyes twice daily x 30 day(s) Pill Line Only

Indication: Chronic angle-closure glaucoma

Start Now: Yes

Night Stock Rx#:

Source: Pyxis

Admin Method: Pill Line Stop Date: 04/02/2025 19:33

MAR Label: Place 1 drop in both eyes twice daily x 30 day(s) Pill Line Only

Date of Birth: 08/04/1934 Sex: M Race: WHITE Facility: DEV Encounter Date: 03/03/2025 19:34 Provider: Babineau, William RN Unit: N02

**Renew Medication Orders:** 

Rx# Medication Order Date

One Time Dose Given: No

674487-DEV Ferrous Gluconate 324 MG Tab UD

03/03/2025 19:34

Prescriber Order: Take one tablet by mouth three times a week on Monday, Wednesday, and

Friday on empty stomach x 30 day(s) Pill Line Only

Indication: Anemia, unspecified

674413-DEV Furosemide 40 MG Tab UD

03/03/2025 19:34

<u>Prescriber Order:</u> Take one tablet (40 MG) by mouth twice daily morning and at noon Hold his

systolic blood pressure <100 x 30 day(s) Pill Line Only

Indication: Other heart failure

Start Now: Yes

Night Stock Rx#:

Source: Pyxis

Admin Method: Pill Line Stop Date: 04/02/2025 19:33

MAR Label: Take one tablet (40 MG) by mouth twice daily morning and at noon Hold his

systolic blood pressure <100 x 30 day(s) Pill Line Only

One Time Dose Given: No

674488-DEV Glucose 4 GM Tab

03/03/2025 19:34

**Prescriber Order:** Chew and swallow 4 tablets (16 GM) by mouth AS NEEDED for

hypoglycemia and alert medical PRN x 30 day(s) Pill Line Only

Indication: Diabetes mellitus, type II (adult-onset)

Start Now: Yes

Night Stock Rx#:

Source: Pyxis

Admin Method: Pill Line Stop Date: 04/02/2025 19:33

MAR Label: Chew and swallow 4 tablets (16 GM) by mouth AS NEEDED for hypoglycemia and

alert medical PRN x 30 day(s) Pill Line Only

One Time Dose Given: No

674489-DEV guaiFENesin ER Tab 12 Hr 600 MG UD

03/03/2025 19:34

Prescriber Order: Take one tablet (600 MG) by mouth twice daily AS NEEDED for secretions

related to for cough PRN x 10 day(s) Pill Line Only

Indication: Unspecified bacterial pneumonia

Start Now: Yes

Night Stock Rx#:

Source: Pyxis

Admin Method: Pill Line Stop Date: 03/13/2025 19:33

MAR Label: Take one tablet (600 MG) by mouth twice daily AS NEEDED for secretions related

to for cough PRN x 10 day(s) Pill Line Only

One Time Dose Given: No

674385-DEV Insulin NPH (10 ML) 100 UNITS/ML INJ

03/03/2025 19:34

Date of Birth: 08/04/1934 Sex: M Race: WHITE Facility: DEV Encounter Date: 03/03/2025 19:34 Provider: Babineau, William RN Unit: N02

### **Renew Medication Orders:**

Rx# Medication Order Date

<u>Prescriber Order:</u> Inject 22 units of NPH insulin subcutaneously each morning x 30 day(s) Pill

Line Only

Indication: Diabetes mellitus, type II (adult-onset)

Start Now: Yes

Night Stock Rx#:

Source: Pyxis

Admin Method: Pill Line Stop Date: 04/02/2025 19:33

MAR Label: Inject 22 units of NPH insulin subcutaneously each morning x 30 day(s) Pill Line

Only

One Time Dose Given: No

674384-DEV Insulin NPH (10 ML) 100 UNITS/ML INJ

03/03/2025 19:34

Prescriber Order: Inject 22 units of NPH insulin subcutaneously each evening x 30 day(s) Pill

Line Only

Indication: Diabetes mellitus, type II (adult-onset)

Start Now: Yes

Night Stock Rx#:

Source: Pyxis

Admin Method: Pill Line Stop Date: 04/02/2025 19:33

MAR Label: Inject 22 units of NPH insulin subcutaneously each evening x 30 day(s) Pill Line

Only

One Time Dose Given: No

674387-DEV Insulin Reg (10 ML) 100 UNITS/ML Inj

03/03/2025 19:34

<u>Prescriber Order:</u> Inject 8 units of regular insulin subcutaneously each morning x 30 day(s) Pill

Line Only

Indication: Diabetes mellitus, type II (adult-onset)

Start Now: Yes

Night Stock Rx#:

Source: Pyxis

Admin Method: Pill Line Stop Date: 04/02/2025 19:33

MAR Label: Inject 8 units of regular insulin subcutaneously each morning x 30 day(s) Pill Line

Only

One Time Dose Given: No

674386-DEV Insulin Reg (10 ML) 100 UNITS/ML Inj

03/03/2025 19:34

<u>Prescriber Order:</u> Inject 8 units of regular insulin subcutaneously each evening x 30 day(s) Pill

Line Only

Indication: Diabetes mellitus, type II (adult-onset)

Start Now: Yes

Night Stock Rx#:

Source: Pyxis

Admin Method: Pill Line

Date of Birth: 08/04/1934 Sex: M Race: WHITE Facility: DEV Encounter Date: 03/03/2025 19:34 Provider: Babineau, William RN Unit: N02

### **Renew Medication Orders:**

Rx# Medication Order Date

Stop Date: 04/02/2025 19:33

MAR Label: Inject 8 units of regular insulin subcutaneously each evening x 30 day(s) Pill Line

Only

One Time Dose Given: No

674490-DEV Latanoprost Ophth Soln 0.005% [2.5ml]

03/03/2025 19:34

**Prescriber Order:** Place 1 drop in both eyes each evening x 30 day(s) Pill Line Only

Indication: Chronic angle-closure glaucoma

Start Now: Yes

Night Stock Rx#:

Source: Pyxis

Admin Method: Pill Line Stop Date: 04/02/2025 19:33

MAR Label: Place 1 drop in both eyes each evening x 30 day(s) Pill Line Only

One Time Dose Given: No

671070-DEV Memantine 10 MG Tab

03/03/2025 19:34

Prescriber Order: Take one tablet (10 MG) by mouth twice daily x 30 day(s) Pill Line Only

Indication: Mild cognitive impairment, so stated

Start Now: Yes

Night Stock Rx#:

Source: Pyxis

Admin Method: Pill Line Stop Date: 04/02/2025 19:33

MAR Label: Take one tablet (10 MG) by mouth twice daily x 30 day(s) Pill Line Only

One Time Dose Given: No

674491-DEV Nystatin Powder 100,000 UNIT/GM [30 GM]

03/03/2025 19:34

Prescriber Order: Apply topically to the affected area(s) three times daily (inguinal/groin, pannus) \*\*non-formulary approved until: 4/2/25 x 30 day(s) Pill Line Only

Indication: Tinea cruris

Start Now: Yes

Night Stock Rx#:

Source: Pyxis

Admin Method: Pill Line Stop Date: 04/02/2025 19:33

MAR Label: Apply topically to the affected area(s) three times daily (inguinal/groin, pannus)

\*\*non-formulary approved until: 4/2/25 x 30 day(s) Pill Line Only

One Time Dose Given: No

671137-DEV risperiDONE 0.5 MG Tab UD

03/03/2025 19:34

<u>Prescriber Order:</u> Take one tablet (0.5 MG) by mouth each day AS NEEDED for agitation PRN

x 30 day(s) Pill Line Only

Indication: Unspecified dementia with behavioral disturbance

Start Now: Yes

Date of Birth: 08/04/1934 Sex: M Race: WHITE Facility: DEV Encounter Date: 03/03/2025 19:34 Provider: Babineau, William RN Unit: N02

### **Renew Medication Orders:**

Rx# Medication Order Date

Night Stock Rx#: Source: Pyxis

Admin Method: Pill Line Stop Date: 04/02/2025 19:33

MAR Label: Take one tablet (0.5 MG) by mouth each day AS NEEDED for agitation PRN x 30

day(s) Pill Line Only

One Time Dose Given: No

674492-DEV Spironolactone 25 MG Tab UD

03/03/2025 19:34

<u>Prescriber Order:</u> Take one-half (1/2) tablet (12.5 MG) by mouth each day x 30 day(s) Pill Line

Only

Indication: Hypertension, Benign Essential, Atrioventricular block, complete

Start Now: Yes

Night Stock Rx#:

Source: Pyxis

Admin Method: Pill Line Stop Date: 04/02/2025 19:33

MAR Label: Take one-half (1/2) tablet (12.5 MG) by mouth each day x 30 day(s) Pill Line Only

One Time Dose Given: No

671138-DEV traZODone HCI 50 MG Tab UD

03/03/2025 19:34

Prescriber Order: Take one tablet (50 MG) by mouth at bedtime AS NEEDED for agitation PRN

x 30 day(s) Pill Line Only

Indication: Unspecified dementia with behavioral disturbance

Start Now: Yes

Night Stock Rx#:

Source: Pyxis

Admin Method: Pill Line Stop Date: 04/02/2025 19:33

MAR Label: Take one tablet (50 MG) by mouth at bedtime AS NEEDED for agitation PRN x 30

day(s) Pill Line Only

One Time Dose Given: No

### **Reconciled Medications:**

<u>Source</u>	<u>Action</u>	<u>Type</u>	<u>Rx#</u>	<u>Medication</u>	Order Detail
BOP	Continue	Rx	674478-DEV	Acetaminophen 325 MG Tab UD	Take two tablets (650 MG) by mouth three times daily
ВОР	Continue	Rx	674479-DEV	Aspirin 81 MG EC Tab UD	Take one tablet (81 MG) by mouth each day
ВОР	Continue	Rx	674480-DEV	Atorvastatin 20 MG TAB UD	Take one tablet (20 MG) by mouth each evening for control of cholesterol
ВОР	Continue	Rx	674481-DEV	Bisacodyl E.C. 5 MG TAB UD	Take one tablet (5 MG) by mouth each day AS NEEDED for constipation
BOP	Continue	Rx	674482-DEV	Cholecalciferol (Vit D) 50,000 UNIT (1.25 mg)Cap	Take one capsule by mouth once a month on the first of the month
0 1 1001001000 10 10 1 0 1 1 1 1 1 1 1					

Inmate Name: ORENA, VICTOR

Date of Birth: 08/04/1934

Encounter Date: 03/03/2025 19:34

Sex: M Race: WHITE Facility: DEV

Provider: Babineau, William RN

Unit: N02

Source	<u>Action</u>	Туре	Rx#	<u>Medication</u>	Order Detail
ВОР	Continue	Rx	671075-DEV	Citalopram 10 MG Tab UD	Take one tablet (10 MG) by mouth every night at bedtime
ВОР	Continue	Rx	674483-DEV	Clopidogrel Bisulfate 75 MG Tab UD	Take one tablet (75 MG) by mouth daily
ВОР	Continue	Rx	674484-DEV	Cromolyn OPHTH Solution 4%, 10ML	Place 2 drops in both eyes four times daily
ВОР	Continue	Rx	674485-DEV	Docusate Sodium 100 MG Cap UD	Take one capsule (100 MG) by mouth twice daily AS NEEDED for hard or infrequent stools - Take with a glassful of water
ВОР	Continue	Rx	671060-DEV	Donepezil HCL 5 MG Tab UD	Take one tablet (5 MG) by mouth each morning
ВОР	Continue	Rx	674486-DEV	Dorzolamide-Timolol Opht Soln 22.3-6.8mg/ml 10ML	Place 1 drop in both eyes twice daily
BOP	Continue	Rx	674487-DEV	Ferrous Gluconate 324 MG Tab UD	Take one tablet by mouth three times a week on Monday, Wednesday, and Friday on empty stomach
ВОР	Continue	Rx	674413-DEV	Furosemide 40 MG Tab UD	Take one tablet (40 MG) by mouth twice daily morning and at noon Hold his systolic blood pressure <100
ВОР	Continue	Rx	674488-DEV	Glucose 4 GM Tab	Chew and swallow 4 tablets (16 GM) by mouth AS NEEDED for hypoglycemia and alert medical
ВОР	Continue	Rx	674489-DEV	guaiFENesin ER Tab 12 Hr 600 MG UD	Take one tablet (600 MG) by mouth twice daily AS NEEDED for secretions related to for cough
ВОР	Continue	Rx	674385-DEV	Insulin NPH (10 ML) 100 UNITS/ML INJ	Inject 22 units of NPH insulin subcutaneously each morning
ВОР	Continue	Rx	674384-DEV	Insulin NPH (10 ML) 100 UNITS/ML INJ	Inject 22 units of NPH insulin subcutaneously each evening
ВОР	Continue	Rx	674387-DEV	Insulin Reg (10 ML) 100 UNITS/ML Inj	Inject 8 units of regular insulin subcutaneously each morning
ВОР	Continue	Rx	674386-DEV	Insulin Reg (10 ML) 100 UNITS/ML Inj	Inject 8 units of regular insulin subcutaneously each evening
ВОР	Continue	Rx	674490-DEV	Latanoprost Ophth Soln 0.005% [2.5ml]	Place 1 drop in both eyes each evening
ВОР	Continue	Rx	671070-DEV	Memantine 10 MG Tab	Take one tablet (10 MG) by mouth twice daily
ВОР	Continue	Rx	674491-DEV	Nystatin Powder 100,000 UNIT/GM [30 GM]	Apply topically to the affected area(s) three times daily (inguinal/groin, pannus) **nonformulary approved until: 4/2/25
ВОР	Continue	Rx	671137-DEV	risperiDONE 0.5 MG Tab UD	Take one tablet (0.5 MG) by mouth each day AS NEEDED for agitation
ВОР	Continue	Rx	674492-DEV	Spironolactone 25 MG Tab UD	Take one-half (1/2) tablet (12.5 MG) by mouth each day
ВОР	Continue	Rx	671138-DEV	traZODone HCI 50 MG Tab UD	Take one tablet (50 MG) by mouth at bedtime AS NEEDED for agitation
		OTC		No known OTCs	

### Disposition:

Date of Birth: 08/04/1934 Sex: M Race: WHITE Facility: DEV
Encounter Date: 03/03/2025 19:34 Provider: Babineau, William RN Unit: N02

To be Evaluated by Provider Follow-up in 12-24 Hours

**Patient Education Topics:** 

Date Initiated Format Handout/Topic Provider Outcome

03/03/2025 Not Done Babineau, William No Participation

Copay Required: No Cosign Required: Yes

Telephone/Verbal Order: Yes By: Churchville, Lawrence MD

Telephone or Verbal order read back and verified.

Completed by Babineau, William RN on 03/03/2025 19:49

Requested to be cosigned by Churchville, Lawrence MD.

Cosign documentation will be displayed on the following page.

Requested to be reviewed by Quill, P. (MOUD) NP.

Review documentation will be displayed on the following page.

# Bureau of Prisons Health Services Cosign/Review

Inmate Name:ORENA, VICTORReg #:07540-085Date of Birth:08/04/1934Sex:MRace:WHITEEncounter Date:03/03/2025 19:34Provider:Babineau, William RNFacility:DEV

Reviewed with New Encounter Note by Quill, P. (MOUD) NP on 03/04/2025 11:28.

# Bureau of Prisons Health Services Cosign/Review

Inmate Name:ORENA, VICTORReg #:07540-085Date of Birth:08/04/1934Sex:MRace:WHITEEncounter Date:03/03/2025 19:34Provider:Babineau, William RNFacility:DEV

Cosigned by Churchville, Lawrence MD on 03/04/2025 15:45.

#### Bureau of Prisons Health Services

#### **Clinical Encounter - Administrative Note**

Inmate Name: ORENA, VICTOR Reg #: 07540-085

Date of Birth: 08/04/1934 Sex: M Race: WHITE Facility: DEV Note Date: 03/03/2025 14:08 Provider: Churchville, Lawrence Unit: N02

Reviewed Health Status: Yes

Admin Note - Community Hospital Report encounter performed at Health Services.

**Administrative Notes:** 

ADMINISTRATIVE NOTE 1 Provider: Churchville, Lawrence MD

Physician from Leominster Hospital called

Orena, Victor is improved.

Heart failure/fluid overload improved.

Antibiotics stopped in view of no evidence of infectious process

Returning to MDU on O2 3L/M nasal canula. He will need potassium supplementation. Discharge summary to accompany his return

Allergies:

Allergy Reaction Comments

Topamax Intolerance-other RXN UNKNOWN

Allergies list reviewed/updated for the presence or absence of allergies, sensitivities, and other reactions to drugs, materials, food and environmental factors with the patient on 03/03/2025 14:08 by Churchville, Lawrence MD

Copay Required: No Cosign Required: No

Telephone/Verbal Order: No

Completed by Churchville, Lawrence MD on 03/03/2025 14:12

#### **Bureau of Prisons Health Services** Vitals All

Begin Date: 03/01/2025 End Date: 03/11/2025

Reg #: 07540-085 Inmate Name: ORENA, VICTOR

Temperature:

**Date** <u>Time</u> Fahrenheit Celsius Location **Provider** 

03/05/2025 06:50 DEV 97.9 Mcclurken, Mark RN 36.6 Forehead

Orig Entered: 03/05/2025 06:52 EST Mcclurken, Mark RN

05:40 DEV 03/04/2025 98.0 36.7 Forehead Mcclurken, Mark RN

Orig Entered: 03/04/2025 05:42 EST Mcclurken, Mark RN

03/03/2025 19:35 DEV 97.4 36.3 Babineau, William RN

Orig Entered: 03/03/2025 19:36 EST Babineau, William RN

03/01/2025 06:30 DEV Unavailabl 0.0 Asencio, Kariely Medical Assistant

Orig Entered: 03/01/2025 06:31 EST Asencio, Kariely Medical Assistant

03/01/2025 06:29 DEV Unavailabl Asencio, Kariely Medical Assistant

Orig Entered: 03/01/2025 06:30 EST Asencio, Kariely Medical Assistant

03/01/2025 06:28 DEV 0.0 Unavailabl Asencio, Kariely Medical Assistant

Location

**Rate Per Minute** 

Orig Entered: 03/01/2025 06:30 EST Asencio, Kariely Medical Assistant

Pulse:

Date

Time

**Rhythm** 03/07/2025 13:17 DEV 62 Procaccini, Sherri RN Orig Entered: 03/07/2025 13:18 EST Procaccini, Sherri RN 03/07/2025 07:17 DEV Via Machine Duncan, L. RN 67 Orig Entered: 03/07/2025 07:19 EST Duncan, L. RN 03/05/2025 06:50 DEV 72 Via Machine Mcclurken, Mark RN Orig Entered: 03/05/2025 06:52 EST Mcclurken, Mark RN 03/04/2025 20:07 DEV Procaccini, Sherri RN Orig Entered: 03/04/2025 20:09 EST Procaccini, Sherri RN 03/04/2025 05:40 DEV 90 Via Machine Mcclurken, Mark RN Orig Entered: 03/04/2025 05:42 EST Mcclurken, Mark RN 03/03/2025 19:35 DEV 84 Babineau, William RN Orig Entered: 03/03/2025 19:36 EST Babineau, William RN 03/01/2025 06:29 DEV Unavailable Asencio, Kariely Medical

Orig Entered: 03/01/2025 06:30 EST Asencio, Kariely Medical Assistant

03/01/2025 06:28 DEV Unavailable Asencio, Kariely Medical

Orig Entered: 03/01/2025 06:30 EST Asencio, Kariely Medical Assistant

Respirations:

Date Time Rate Per Minute Provider

03/07/2025 13:17 DEV 18 Procaccini, Sherri RN

Orig Entered: 03/07/2025 13:18 EST Procaccini, Sherri RN

03/05/2025 06:50 DEV 22 Mcclurken, Mark RN

Orig Entered: 03/05/2025 06:52 EST Mcclurken, Mark RN

**Provider** 

Begin Date: 03/01/2025 End Date: 03/11/2025

Reg #: 07540-085 Inmate Name: ORENA, VICTOR

<u>Date</u> <u>Time</u> <u>Rate Per Minute</u> <u>Provider</u>

03/04/2025 20:07 DEV 22 Procaccini, Sherri RN

Orig Entered: 03/04/2025 20:09 EST Procaccini, Sherri RN

03/04/2025 05:40 DEV 30 Mcclurken, Mark RN

Orig Entered: 03/04/2025 05:42 EST Mcclurken, Mark RN

03/03/2025 19:35 DEV 16 Babineau, William RN

Orig Entered: 03/03/2025 19:36 EST Babineau, William RN

03/01/2025 06:29 DEV Unavailable Asencio, Kariely Medical Assistant

Orig Entered: 03/01/2025 06:30 EST Asencio, Kariely Medical Assistant

03/01/2025 06:28 DEV Unavailable Asencio, Kariely Medical Assistant

Orig Entered: 03/01/2025 06:30 EST Asencio, Kariely Medical Assistant

**Blood Pressure:** 

<u>Date Time Value Location Position Cuff Size Provider</u>

03/08/2025 06:41 DEV 138/76 Left Arm Sitting Adult-regular Duncan, L. RN

Orig Entered: 03/08/2025 06:42 EST Duncan, L. RN

03/07/2025 14:50 DEV 103/64 Procaccini, Sherri RN

Orig Entered: 03/07/2025 14:51 EST Procaccini, Sherri RN

03/07/2025 13:17 DEV 96/57 Procaccini, Sherri RN

Orig Entered: 03/07/2025 13:18 EST Procaccini, Sherri RN

03/07/2025 07:17 DEV 114/64 Left Arm Sitting Adult-regular Duncan, L. RN

Orig Entered: 03/07/2025 07:19 EST Duncan, L. RN

03/05/2025 10:26 DEV 117/62 Left Arm Sitting Adult-large Montanez-Gonzalez, Islem RN

Orig Entered: 03/05/2025 10:29 EST Montanez-Gonzalez, Islem RN

03/05/2025 06:50 DEV 113/62 Left Arm Sitting Adult-large Mcclurken, Mark RN

Orig Entered: 03/05/2025 06:52 EST Mcclurken, Mark RN

03/04/2025 20:07 DEV 104/58 Procaccini, Sherri RN

Orig Entered: 03/04/2025 20:09 EST Procaccini, Sherri RN

03/04/2025 05:40 DEV 137/78 Left Arm Sitting Adult-large Mcclurken, Mark RN

Orig Entered: 03/04/2025 05:42 EST Mcclurken, Mark RN

03/03/2025 19:35 DEV 132/79 Babineau, William RN

Orig Entered: 03/03/2025 19:36 EST Babineau, William RN

03/01/2025 06:29 DEV Unavailabl Asencio, Kariely Medical

Orig Entered: 03/01/2025 06:30 EST Asencio, Kariely Medical Assistant

03/01/2025 06:28 DEV Unavailabl Asencio, Kariely Medical

Orig Entered: 03/01/2025 06:30 EST Asencio, Kariely Medical Assistant

**Blood Glucose:** 

<u>Date Time Value (mg/dl) Type Regular Insulin Provider</u>

03/11/2025 06:55 DEV 140 Random Mcclurken, Mark RN

bb

Orig Entered: 03/11/2025 06:56 EST Mcclurken, Mark RN

bb

Begin Date: 03/01/2025 End Date: 03/11/2025

Reg #: 07540-085 Inmate Name: ORENA, VICTOR **Date** Time Value (mg/dl) Regular Insulin Provider **Type** Orig Entered: 03/10/2025 06:39 EST Mcclurken, Mark RN 03/09/2025 18:08 DEV 174 Random Babineau, William RN bb Orig Entered: 03/09/2025 18:10 EST Babineau, William RN 03/09/2025 06:35 DEV 139 Random Mcclurken, Mark RN bb Orig Entered: 03/09/2025 06:36 EST Mcclurken, Mark RN 03/08/2025 16:22 DEV 142 Random Babineau, William RN bb Orig Entered: 03/08/2025 16:23 EST Babineau, William RN 03/08/2025 06:42 DEV 143 Random Duncan, L. RN bb Orig Entered: 03/08/2025 06:43 EST Duncan, L. RN 03/07/2025 06:52 DEV 155 Random Duncan, L. RN BB Orig Entered: 03/07/2025 06:53 EST Duncan, L. RN 03/05/2025 16:39 DEV 121 Unknown Montanez-Gonzalez, Islem BB Orig Entered: 03/05/2025 16:40 EST Montanez-Gonzalez, Islem RN 03/05/2025 06:34 DEV 119 Random Mcclurken, Mark RN bb

Orig Entered: 03/05/2025 06:35 EST Mcclurken, Mark RN

03/04/2025 16:58 DEV 201 Unknown Procaccini, Sherri RN

bb

Orig Entered: 03/04/2025 16:59 EST Procaccini, Sherri RN

03/04/2025 06:37 DEV 243 Random Mcclurken, Mark RN

bb

Orig Entered: 03/04/2025 06:38 EST Mcclurken, Mark RN

#### SaO2:

Value(%) Air Date Time **Provider** 03/07/2025 13:17 DFV 97 Room Air Procaccini, Sherri RN Orig Entered: 03/07/2025 13:18 EST Procaccini, Sherri RN 03/07/2025 07:17 DEV 96 Oxygen 3 L Duncan, L. RN Orig Entered: 03/07/2025 07:19 EST Duncan, L. RN 03/05/2025 06:50 DEV 97 Oxygen 4 L Mcclurken, Mark RN Orig Entered: 03/05/2025 06:52 EST Mcclurken, Mark RN 03/04/2025 Procaccini, Sherri RN 20:07 DEV 97 Oxygen 4 L Orig Entered: 03/04/2025 20:09 EST Procaccini, Sherri RN 05:40 DEV 03/04/2025 94 Oxygen 4 L Mcclurken, Mark RN Orig Entered: 03/04/2025 05:42 EST Mcclurken, Mark RN 03/03/2025 19:35 DEV 93 Oxygen 4 L Babineau, William RN Orig Entered: 03/03/2025 19:36 EST Babineau, William RN 06:29 DEV Unavailabl 03/01/2025 Asencio, Kariely Medical Assistant Orig Entered: 03/01/2025 06:30 EST Asencio, Kariely Medical Assistant

 Begin Date:
 03/01/2025
 End Date:
 03/11/2025

 Reg #:
 07540-085
 Inmate Name:
 ORENA, VICTOR

<u>Date</u> <u>Time</u> <u>Value(%)</u> <u>Air</u> <u>Provider</u>

03/01/2025 06:28 DEV Unavailabl Asencio, Kariely Medical Assistant

Orig Entered: 03/01/2025 06:30 EST Asencio, Kariely Medical Assistant

Weight:

<u>Date Time Lbs Kg Waist Circum. Provider</u>

03/10/2025 14:05 DEV 202.0 91.6 Charles-Washington, M. RN

Orig Entered: 03/10/2025 14:07 EST Charles-Washington, M. RN

03/09/2025 15:37 DEV 200.7 91.0 Babineau, William RN

Orig Entered: 03/09/2025 15:39 EST Babineau, William RN

03/08/2025 15:01 DEV 200.0 90.7 Babineau, William RN

Orig Entered: 03/08/2025 15:02 EST Babineau, William RN

03/07/2025 10:57 DEV 199.5 90.5 Procaccini, Sherri RN

Orig Entered: 03/07/2025 10:58 EST Procaccini, Sherri RN

03/06/2025 11:10 DEV 199.0 90.3 Fadahunsi, Bolanle RN

Orig Entered: 03/06/2025 11:15 EST Fadahunsi, Bolanle RN

03/05/2025 13:23 DEV 197.0 89.4 Montanez-Gonzalez, Islem RN

Orig Entered: 03/05/2025 13:24 EST Montanez-Gonzalez, Islem RN

03/04/2025 14:17 DEV 198.0 89.8 Procaccini, Sherri RN

Orig Entered: 03/04/2025 14:18 EST Procaccini, Sherri RN

03/03/2025 09:24 DEV Unavail 0.0 Babineau, William RN

**OSH** 

Orig Entered: 03/03/2025 09:25 EST Babineau, William RN

03/02/2025 07:56 DEV Unavail 0.0 Procaccini, Sherri RN

OSH

Orig Entered: 03/02/2025 07:57 EST Procaccini, Sherri RN

03/01/2025 06:29 DEV Unavail 0.0 Asencio, Kariely Medical Assistant

OSH

Orig Entered: 03/01/2025 06:30 EST Asencio, Kariely Medical Assistant

## Bureau of Prisons Health Services

## **PPDs**

Reg #: (	07540-085	Inmate Name: ORENA, VICTOR	OR		
<u>Admin:</u>	Location	Provider	Reading:	<u>Induration</u>	Provider
Hx of	Documented Reading Hx		07/01/2013 00:00	20 mm	Secor, Jeffrey HSA

Orig Entered: 07/01/2013 20:21 EST Secor, Jeffrey HSA

**Medication Administration Record** 

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**MARCH 2025** 

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Churchville, Lawrence MD

Take two tablets (650 MG) by mouth three times daily

Exp. Date 03/04/25 07:41

DEV

Ord. Date 02/26/25 15:26

DEV

22 23 24 25 26 9 10 11 12 13 14 15 16 17 18 19 20 21 ∞ 9 2 4 ORD MAM 06:19 က ORD WJB 19:49 2 × × Time 0090 1900 Churchville, Lawrence MD Take two tablets (650 MG) by mouth three times daily x 30 day(s) Pill Line Only Acetaminophen 325 MG Tab UD Medication Orders Exp. Date 04/02/25 19:33 Ord. Date 03/03/25 19:34 Order

674478- DEV	Acetaminophen 325 MG Tab UD																														
Ord. Date 03/03/25 19:34	Churchville, Lawrence MD Take two tablets (650 MG) by mouth three	1100	×	× ×	2 SPR 10:57	×	×	×	×	×	×	×	× ×	×	*	×	×	×	×	×	×	×	×	×	×	×	×	× ×	*	*	
Exp. Date 03/04/25 13:24																															
DEV																															
675115- DEV	Acetaminophen 325 MG Tab UD																														
Ord. Date 03/04/25 13:23	Churchville, Lawrence MD Take two tablets (650 MG) by mouth three	0090	×	× ×	*	2 MAM 06:25	2 MAM 06:31	2 LGD 06:42	2 LGD 06:31	2 MAM 1	2 MAM N 06:31 0	2 MAM 06:31																			
Exp. Date 08/31/25 13:22	times daily	1100	×	× ×	×	2 IMG 10:30	2 BF 10:49	2 SPR 10:54	2 WJB 15:02	2 WJB 11:30	2 MZC 10:42																				
DEV		1900	×	× ×	2 SPR 18:39	2 N IMG 9 19:06	2 WJB 17:58	2 SPR 18:34	2 WJB 18:26	2 WJB 18:12	2 KZH 17:12																				
675263- DEV	Acetaminophen 325 MG Tab UD																														

Providers: MAM = Mcclurken, M. | MZC = Charles-Washington, M. | SPR = Procaccini, S. | LGD = Duncan, L. | BF = Fadahunsi, B. | IMG = Montanez-Gonzalez, I. | KZH = Hatzidakis, K. | WJB = Babineau, W.

Documentation Codes: ORD = Order | NI = Dose Not Indicated | R = Refused | O = Other

Registration #: 07540-085

Pt. Name: ORENA, VICTOR

**Medication Administration Record** 

**MARCH 2025** 

	Medication Orders	Time	1	2 3	4	5	9	2	8	10	1	12	13	14 1	15 1	16 1	17 18	3 19	20	21	22	23 2	24 2	25 2	26 2	27 28	8 29	9 30	31	
Ord. Date 02/24/25 12:14					×	×	×	× ×	× ×	×	×	×	×	×	×	× ×	×	×	×	×	×	×	×	× ×	× ×	×	×	×	×	
Exp. Date 03/03/25 12:13	days ***It is important to finish ALL of this medication***																													
DEV																														
674135- DEV	Amoxicillin/Clav 875/125MG TAB																													
Ord. Date 03/03/25 19:34	Churchville, Lawrence MD Take one tablet (81 MG) by mouth each day x	0090	× ×	*	ORD MAM 06:19																									
Exp. Date 04/02/25 19:33																														
DEV																														
Order	Aspirin 81 MG EC Tab UD																													
Ord. Date 02/26/25 15:26	Churchville, Lawrence MD  Take one tablet (81 MG) by mouth each day					×	×	× ×	× ×	×	×	×	×	×	×	× ×	×	×	×	×	×	×	×	× ×	× ×	×	×	×	×	
Exp. Date 03/04/25 07:41																														
DEV																														
674479- DEV	Aspirin 81 MG EC Tab UD																													
Ord. Date 03/03/25 19:34	Churchville, Lawrence MD Take one tablet (81 MG) by mouth each day		× ×			×	×	× ×	× ×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	
Exp. Date 03/04/25 13:24																														
DEV																														
675116- DEV	Aspirin 81 MG EC Tab UD																													
] [: ] [:			{	$\left\{ \left[ \right] \right\}$				$\  \ $	$\  \ $	$\  \ $	$\  \ $	]			$\ $	$\left\{ \left[ \right] \right\}$	$\  \ $	$\  \ $	$\prod$	]	]		$\  \ $	$\left\{ \left[ \right] \right\}$	$\left\{ \left[ \right] \right\}$	$\left\{ \left. \right  \right.$	$\  \ $	$\  \ $	$\  \ $	

Providers: MAM = Mcclurken, M. | MZC = Charles-Washington, M. | SPR = Procaccini, S. | LGD = Duncan, L. | BF = Fadahunsi, B. | IMG = Montanez-Gonzalez, I. | KZH = Hatzidakis, K. | WJB = Babineau, W.

Documentation Codes: ORD = Order | NI = Dose Not Indicated | R = Refused | O = Other

Registration #: 07540-085

Pt. Name: ORENA, VICTOR

07540-085

**Medication Administration Record** 

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22 23 24 25 26 **MARCH 2025** 9 10 11 12 13 14 15 16 17 18 19 20 21 1 MAM 06:32 1 MAM 06:31 1 MAM 06:18 ∞ 1 LGD 06:31 1 LGD 06:42 9 1 MAM 06:31 1 MAM 06:25 2 4 × က × 2 × × Time 0090 Churchville, Lawrence MD Take one tablet (81 MG) by mouth each day Medication Orders Aspirin 81 MG EC Tab UD ORENA, VICTOR Exp. Date 08/31/25 13:23 Ord. Date 03/04/25 13:24 DEV 675264-DEV

ORD WJB 19:50

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1900

Churchville, Lawrence MD

Take one tablet (20 MG) by mouth each evening for control of cholesterol x 30 day(s) Pill Line Only

Exp. Date 04/02/25 19:33

Ord. Date 03/03/25 19:34

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	Atorvastatin 20 MG TAB UD	Churchville, Lawrence MD Take one tablet (20 MG) by mouth each			Atorvastatin 20 MG TAB UD		evening for control of cholesterol	
DEV	Order	Ord. Date 02/26/25 15:27	Exp. Date 03/04/25 07:42	DEV	674480- DEV	Ord. Date 03/03/25 19:34	Exp. Date 03/04/25 13:25	

Providers: MAM = Mcclurken, M. | MZC = Charles-Washington, M. | SPR = Procaccini, S. | LGD = Duncan, L. | BF = Fadahunsi, B. | IMG = Montanez-Gonzalez, I. | KZH = Hatzidakis, K. | WJB = Babineau, W.

Documentation Codes: ORD = Order | NI = Dose Not Indicated | R = Refused | O = Other

Atorvastatin 20 MG TAB UD

675117-DEV

Registration #: 07540-085

Pt. Name: ORENA, VICTOR

**Medication Administration Record** 

**MARCH 2025** 

30 31 × × × 29 × 28 × × 27 × × 22 23 24 25 26 × × × × × × × × × × 2 × × × × × × × × × × × × × × - X ZH 17:12 × × 1 WJB 18:12 × × 1 WJB 18:26 × × 1 SPR 18:34 × × 1 WJB 17:58 × × 1 19:06 × × 1 SPR 18:39 × × × × × × × × 1900 Churchville, Lawrence MD Churchville, Lawrence MD Churchville, Lawrence MD Churchville, Lawrence MD Cholecalciferol (Vit D) 50,000 UNIT (1.25 mg)Cap Cholecalciferol (Vit D) 50,000 UNIT (1.25 mg)Cap Cholecalciferol (Vit D) 50,000 UNIT (1.25 mg)Cap Take one capsule by mouth once a month on the first of the month Take one capsule by mouth once a month on the first of the month Take one capsule by mouth once a month on Take one tablet (20 MG) by mouth each evening for control of cholesterol Medication Orders Atorvastatin 20 MG TAB UD the first of the month Exp. Date 03/04/26 13:23 Exp. Date 03/04/25 13:26 Exp. Date 08/31/25 13:24 Exp. Date 03/04/25 07:43 Ord. Date 02/26/25 15:28 Ord. Date 03/04/25 Ord. Date 03/04/25 13:25 675265-DEV 674482-DEV 675119-DEV Ord. Date 675267-03/04/25 07:42 13:24

Providers: MAM = Mcclurken, M. | MZC = Charles-Washington, M. | SPR = Procaccini, S. | LGD = Duncan, L. | BF = Fadahunsi, B. | IMG = Montanez-Gonzalez, I. | KZH = Hatzidakis, K. | WJB = Babineau, W.

Documentation Codes: ORD = Order | NI = Dose Not Indicated | R = Refused | O = Other

Registration #: 07540-085

Pt. Name: ORENA, VICTOR

**Medication Administration Record** 

**MARCH 2025** 

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10					×				1 KZH 17:12							
6					×				1 WJB 18:12							
∞					×				1 WJB 18:26							
7					×				1 SPR 18:34							
9					×				1 WJB 17:58							
2					×				1 IMG 19:06				ORD MAM 06:25			
4									1 SPR 18:40				ORD MAM 06:19			
က	ORD WJB 19:51								×				×			
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Time	1900								1900				0090			
Medication Orders	Churchville, Lawrence MD  Take one tablet (10 MG) by mouth every night	at bedtime x 30 day(s) Pill Line Only		Citalopram 10 MG Tab UD	Churchville, Lawrence MD Take one tablet (10 MG) by mouth every night			Citalopram 10 MG Tab UD	Churchville, Lawrence MD Take one tablet (10 MG) by mouth every night	at bedtime		Citalopram 10 MG Tab UD	Churchville, Lawrence MD Take one tablet (75 MG) by mouth daily x 30	day(s) Pill Line Only		Clopidogrel Bisulfate 75 MG Tab UD
	Ord. Date 03/03/25 19:34	Exp. Date 04/02/25 19:33	DEV	Order	Ord. Date 01/31/25 08:27	Exp. Date 03/04/25 07:45	) PFV	671075- DEV	Ord. Date 03/03/25 19:34	Exp. Date 03/17/25 19:33	DEV	675120- DEV	Ord. Date 03/03/25 19:34	Exp. Date 04/02/25 19:33	DEV	Order

Providers: MAM = Mcclurken, M. | MZC = Charles-Washington, M. | SPR = Procaccini, S. | LGD = Duncan, L. | BF = Fadahunsi, B. | IMG = Montanez-Gonzalez, I. | KZH = Hatzidakis, K. | WJB = Babineau, W.

Documentation Codes: ORD = Order | NI = Dose Not Indicated | R = Refused | O = Other

Registration #: 07540-085

Pt. Name: ORENA, VICTOR

**Medication Administration Record** 

**MARCH 2025** 

30 31 28 29 × 27 × 22 23 24 25 26 × × × × × 2 × 9 10 11 12 13 14 15 16 17 18 19 20 × × × × × × × × ∞ × × 9 × 2 × 4 က Time Churchville, Lawrence MD Take one tablet (75 MG) by mouth daily Clopidogrel Bisulfate 75 MG Tab UD Medication Orders Exp. Date 03/04/25 13:27 674483-DEV

× × × × × × × × × × × × × × × 1 MAM 06:32 × 1 MAM 06:31 × 1 MAM 06:18 × 1 LGD 06:31 × 1 LGD 06:42 × 1 MAM 06:31 × O × × × × × 0090 Churchville, Lawrence MD Churchville, Lawrence MD Take one tablet (75 MG) by mouth daily Take one tablet (75 MG) by mouth daily Clopidogrel Bisulfate 75 MG Tab UD Exp. Date 03/04/26 13:25 Ord. Date 03/04/25 13:26 675268-DEV

×

Clopidogrel Bisulfate 75 MG Tab UD Exp. Date 03/05/25 06:45 Ord. Date 03/03/25 19:34 675352-DEV

MAM × × 0090 Churchville, Lawrence MD Place 2 drops in both eyes four times daily x 30 day(s) Pill Line Only Exp. Date 04/02/25 19:33 Ord. Date 03/03/25 19:34

Cromolyn OPHTH Solution 4%, 10ML

DEV

Providers: MAM = Mcclurken, M. | MZC = Charles-Washington, M. | SPR = Procaccini, S. | LGD = Duncan, L. | BF = Fadahunsi, B. | IMG = Montanez-Gonzalez, I. | KZH = Hatzidakis, K. | WJB = Babineau, W.

Documentation Codes: ORD = Order | NI = Dose Not Indicated | R = Refused | O = Other

Pt. Name: ORENA, VICTOR Registration #: 07540-085

**Medication Administration Record** 

**MARCH 2025** 

Ord. Date 02/26/25 15:29	Churchville, Lawrence MD Place 2 drops in both eyes four times daily	0090			0.08 SPR 16:55	*	×	×	×	×	× ×	×	×	×	×	×	×	×	×	× ×	×	×	×	×	×	×	×	×	× ×	
Exp. Date 03/04/25 07:45																														
DEV																														
674484- DEV	Cromolyn OPHTH Solution 4%, 10ML																													
Ord. Date 03/03/25 19:34	Churchville, Lawrence MD Place 2 drops in both eyes four times daily	0090	×	× ×	o SPR	×	×	×	×	×	× ×	×	×	×	×	×	×	×	×	× ×	×	×	×	×	×	×	×	×	× ×	
Exp. Date 03/04/25 13:30		1100	×	× ×	S R R	×	×	×	×	×	× ×	×	×	×	×	×	×	×	×	× ×	×	×	×	×	×	×	×	×	× ×	
DEV																														
675121- DEV	Cromolyn OPHTH Solution 4%, 10ML																													
Ord. Date 03/04/25 13:30	Churchville, Lawrence MD Place 2 drops in both eyes four times daily	0090	×	×	×	R MAM	R	0.08 LGD 07:19	0.08 LGD 06:35	R F	R MAM MAM	~ M																		
Exp. Date 08/31/25 13:29		1100	×	× ×	×	R	0.08 BF 10:50	SPR	R was w	NJB M	0.08 MZC 11:11																			
DEV		1630	×	× ×	S PR	R BI	R WJB	SPR	N WJB	WJB K	KZH KZH																			
675269- DEV	Cromolyn OPHTH Solution 4%, 10ML	1900	×	*	0.08 SPR 18:40	R ING	R WJB	SPR	R was	WJB K	KZH HZ																			
Ord. Date 03/03/25 19:34		0090	×	× ×	ORD MAM 06:20																									
Exp. Date 04/02/25 19:33	x 30 day(s) Pill Line Only																													
DEV																														
Order	Donepezil HCL 5 MG Tab UD																													

Providers: MAM = Mcclurken, M. | MZC = Charles-Washington, M. | SPR = Procaccini, S. | LGD = Duncan, L. | BF = Fadahunsi, B. | IMG = Montanez-Gonzalez, I. | KZH = Hatzidakis, K. | WJB = Babineau, W.

Documentation Codes: ORD = Order | NI = Dose Not Indicated | R = Refused | O = Other

Pt. Name: ORENA, VICTOR Registration #: 07540-085

**Medication Administration Record** 

	Medication Orders	Time	<u></u>	2	4	5	1 9	7 8	6	10	Ξ,	12 1	3 14	4 15	5 16	17	18 1	19 2	20 21	1 22	23	24	25	26 2	27 28	8 29	30	31
Ord. Date 01/31/25 07:57	Churchville, Lawrence MD  Take one tablet (5 MG) by mouth each morning					×	× ×	*	×	×	×	× ×	×	×	×	×	×	× ×	*	×	×	×	×	×	× ×	×	×	×
Exp. Date 03/04/25 07:46																												
DEV																												
671060- DEV	Donepezil HCL 5 MG Tab UD																											
Ord. Date 03/03/25 19:34	Churchville, Lawrence MD Take one tablet (5 MG) by mouth each morning		*	×		×	× ×	*	×	×	×	× ×	×	×	×	×	×	× ×	×	×	×	×	×	×	× ×	×	×	×
Exp. Date 03/04/25 13:32																												
DEV																												
675123- DEV	Donepezil HCL 5 MG Tab UD																											
Ord. Date 03/04/25 13:34	Churchville, Lawrence MD Take one tablet (5 MG) by mouth each morning	0090	×	× ×	×	1 MAM MA 06:26 06:	1 1 MAM LGD 06:31 06:43	1 LGD LGD 43 06:31	1 MAM 06:18	1 MAM 06:31	1 MAM 06:32																	
Exp. Date 08/31/25 13:33																												
) V																												
675271- DEV	Donepezil HCL 5 MG Tab UD																											
Ord. Date 03/03/25 19:34	Churchville, Lawrence MD Place 1 drop in both eves twice daily x 30	0090	×	× ×	R																							
Exp. Date 04/02/25 19:33	day(s) Pill Line Only																											
DEV																												
Order	Dorzolamide-Timolol Opht Soln 22.3-6.8mg/ml																											
			1	$\frac{1}{2}$	]	1	+	-	-	]	1	+	+	-		1	†	+	-	-		]	1	$\dagger$	$\frac{1}{2}$	┨	]	]

Providers: MAM = Mcclurken, M. | MZC = Charles-Washington, M. | SPR = Procaccini, S. | LGD = Duncan, L. | BF = Fadahunsi, B. | IMG = Montanez-Gonzalez, I. | KZH = Hatzidakis, K. | WJB = Babineau, W.

Documentation Codes: ORD = Order | NI = Dose Not Indicated | R = Refused | O = Other

Registration #: 07540-085

Pt. Name: ORENA, VICTOR

**Medication Administration Record** 

**MARCH 2025** 

30 31 × × × × 28 29 × × × × × 27 × × × 22 23 24 25 26 × × × × × × × × × × × × × × × 2 × × 9 10 11 12 13 14 15 16 17 18 19 20 × × × × × × × × × × × × × × MAM × × × MAM 0.17 KZH 17:12 × × × R 0.17 WJB 18:12 × × × ∞ 0.17 LGD 06:31 0.17 WJB 18:26 × × × MAM / × s PR × × 9 MAM 0.17 WJB 17:58 × × × MAM 2 R B × × × 4 × S PR × က × × × × × × × Time 0090 1900 Churchville, Lawrence MD Churchville, Lawrence MD Riley, E. NP-C Churchville, Lawrence MD Dorzolamide-Timolol Opht Soln 22.3-6.8mg/ml Take one capsule (100 MG) by mouth twice daily for 7 days Dorzolamide-Timolol Opht Soln 22.3-6.8mg/ml Dorzolamide-Timolol Opht Soln 22.3-6.8mg/ml Place 1 drop in both eyes twice daily Place 1 drop in both eyes twice daily Place 1 drop in both eyes twice daily Doxycycline Hyclate 100 MG Tab UD Medication Orders Exp. Date 03/03/25 12:13 Exp. Date 03/04/25 07:46 Exp. Date 08/31/25 13:39 Exp. Date 03/04/25 13:41 Ord. Date 03/03/25 19:34 Ord. Date 03/04/25 13:40 Ord. Date 02/24/25 12:14 675124-DEV 674486-DEV 675272-DEV 674136-DEV

Providers: MAM = Mcclurken, M. | MZC = Charles-Washington, M. | SPR = Procaccini, S. | LGD = Duncan, L. | BF = Fadahunsi, B. | IMG = Montanez-Gonzalez, I. | KZH = Hatzidakis, K. | WJB = Babineau, W.

Documentation Codes: ORD = Order | NI = Dose Not Indicated | R = Refused | O = Other

Pt. Name: ORENA, VICTOR Registration #: 07540-085

**Medication Administration Record** 

**MARCH 2025** 

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∞	×	×			×				×							
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9	*	×			×				×							
2	×	×			×				×				1 MAM 06:26			
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ne																
Time	0090	1900											0090			
Medication Orders	Fandreyer, F. FNP Take one tablet (20 MG) by mouth twice daily			Famotidine 20 MG Tab	Churchville, Lawrence MD Take one tablet by mouth three times a week	on Monday, Wednesday, and Friday on empty stomach		Ferrous Gluconate 324 MG Tab UD	Churchville, Lawrence MD Take one tablet by mouth three times a week	on Monday, Wednesday, and Friday on empty stomach		Ferrous Gluconate 324 MG Tab UD	Churchville, Lawrence MD Take one tablet by mouth three times a week	on Monday, Wednesday, and Friday on empty stomach		Ferrous Gluconate 324 MG Tab UD
	Ord. Date 03/10/25 11:19	Exp. Date 04/09/25 11:18	DEV	676113- DEV	Ord. Date 02/26/25 15:42	Exp. Date 03/04/25 07:47	) EV	674487- DEV	Ord. Date 03/04/25 07:46	Exp. Date 03/04/25 13:42	DEV	675125- DEV	Ord. Date 03/04/25 13:41	Exp. Date 08/31/25 13:40	DEV	675273- DEV

Providers: MAM = Mcclurken, M. | MZC = Charles-Washington, M. | SPR = Procaccini, S. | LGD = Duncan, L. | BF = Fadahunsi, B. | IMG = Montanez-Gonzalez, I. | KZH = Hatzidakis, K. | WJB = Babineau, W.

Documentation Codes: ORD = Order | NI = Dose Not Indicated | R = Refused | O = Other

Registration #: 07540-085

Pt. Name: ORENA, VICTOR

19:34

**Medication Administration Record** 

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**MARCH 2025** 

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Quist, Daniel PA-C

Ord. Date

Order

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02/26/25

06:30

Take one tablet (40 MG) by mouth twice daily morning and at noon Hold his systolic blood pressure <100

2 19 20 9 10 11 12 13 14 15 16 17 6 ∞ ဖ 2 4 ORD MAM 06:20 က × 2 × × Time 0090 Churchville, Lawrence MD Take one tablet (40 MG) by mouth twice daily morning and at noon Hold his systolic blood pressure <100 x 30 day(s) Pill Line Only Medication Orders Furosemide 40 MG Tab UD Exp. Date Ord. Date 03/03/25 04/02/25

× × × × × × × × × × × × × × × 1 MAM 06:32 × 1 MAM 06:31 1 MZC 10:42 × 1 MAM 06:18 1 WJB 11:30 × 1 LGD 06:35 1 WJB 15:02 × × 1 LGD 06:43 1 SPR 10:54 1 BF 10:49 × 1 MAM 06:31 10:30 × 1 MAM 06:26 1 SPR 10:57 × × × × × × × 1100 0090 Churchville, Lawrence MD Churchville, Lawrence MD Take one tablet (40 MG) by mouth twice daily morning and at noon \*Do not give if systolic blood pressure <100 Take one tablet (40 MG) by mouth twice daily morning and at noon \*Do not give if systolic Furosemide 40 MG Tab UD Furosemide 40 MG Tab UD Exp. Date 03/04/25 07:47 Ord. Date 03/04/25 Exp. Date Exp. Date 674413-DEV Ord. Date 03/04/25 13:43 03/03/25 675126-19:34 13:42

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Providers: MAM = Mcclurken, M. | MZC = Charles-Washington, M. | SPR = Procaccini, S. | LGD = Duncan, L. | BF = Fadahunsi, B. | IMG = Montanez-Gonzalez, I. | KZH = Hatzidakis, K. | WJB = Babineau, Furosemide 40 MG Tab UD

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1100

blood pressure <100

08/31/25

675274-

Documentation Codes: ORD = Order | NI = Dose Not Indicated | R = Refused | O = Other

Pt. Name: ORENA, VICTOR Registration #: 07540-085

**Medication Administration Record** 

**MARCH 2025** 

30 31 × × × × × × 28 29 × × × × × × 27 × × × 22 23 24 25 26 × × × × × × × × × × × × × × × 9 10 11 12 13 14 15 16 17 18 19 20 21 × ∞ × × × × × × 9 × × × 2 × × × 4 ORD MAM 06:17 က × 2 × × × × Time 0090 Churchville, Lawrence MD Churchville, Lawrence MD Churchville, Lawrence MD Churchville, Lawrence MD Inject 22 units of NPH insulin subcutaneously each morning x 30 day(s) Pill Line Only Inject 22 units of NPH insulin subcutaneously each evening Inject 22 units of NPH insulin subcutaneously each evening Inject 22 units of NPH insulin subcutaneously Insulin NPH (10 ML) 100 UNITS/ML INJ Medication Orders each morning Exp. Date 04/02/25 19:33 Exp. Date 03/04/25 08:03 Exp. Date 03/04/25 08:03 Ord. Date 02/25/25 15:21 Ord. Date 02/25/25 Ord. Date 03/03/25 19:34 Exp. Date 674384-DEV 674385-DEV Ord. Date 675129-DEV Order 19:34 15:21 DEV

Providers: MAM = Mcclurken, M. | MZC = Charles-Washington, M. | SPR = Procaccini, S. | LGD = Duncan, L. | BF = Fadahunsi, B. | IMG = Montanez-Gonzalez, I. | KZH = Hatzidakis, K. | WJB = Babineau, W.

Documentation Codes: ORD = Order | NI = Dose Not Indicated | R = Refused | O = Other

Pt. Name: ORENA, VICTOR Registration #: 07540-085

**Medication Administration Record** 

	Medication Orders	Time	_	2 3	4	2	9	7	8 0	10	11	12	13	14 1	5 1	6 1	7 18	19	20	21.2	22 2	23 24	1 25	26	27 ;	28 2	29 30	0 31	
	Churchville, Lawrence MD Inject 22 units of NPH insulin subcutaneously		*	×		×	×	×	× ×	×	×	×	×	×	× ×	*	×	×	×	×	× ×	×	×	×	×	× ×	× ×	×	
Exp. Date 03/04/25 13:46	each morning																												I .
	Insulin NPH (10 ML) 100 UNITS/ML INJ																												1
	Churchville, Lawrence MD Inject 22 units of NPH insulin subcutaneously	1700	×	× ×	0.22 SPR 16:57	0.22 IMG 16:39		0.22 0. SPR W 16:43 16	0.22 0.22 WJB WJB 16:23 18:10	2 0.22 B KZH 0 17:11	_																		1
Exp. Date 03/04/26 13:43	each evening																												ı
	Insulin NPH (10 ML) 100 UNITS/ML INJ																												
	Churchville, Lawrence MD Inject 22 units of NPH insulin subcutaneously	0090	×	× ×	×	0.22 MAM 06:22	0.22 MAM 06:10	0.22 LGD 06:40	0.22 MAM 06:11	2 0.22 M MAM 1 06:28	0.22 MAM 06:24																		
Exp. Date 03/04/26 13:44	each morning																												
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	Insulin NPH (10 ML) 100 UNITS/ML INJ																												
Ord. Date 03/03/25		0090	×	× ×	ORD MAM 06:17																								
19:34 Exp. Date 04/02/25 19:33	Inject 8 units of regular insulin subcutaneously each morning x 30 day(s) Pill Line Only			+	+			+		_					+	+						_					+	_	_
	Insulin Reg (10 ML) 100 UNITS/ML Inj																												
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Providers: MAM = Mcclurken, M. | MZC = Charles-Washington, M. | SPR = Procaccini, S. | LGD = Duncan, L. | BF = Fadahunsi, B. | IMG = Montanez-Gonzalez, I. | KZH = Hatzidakis, K. | WJB = Babineau, W.

Documentation Codes: ORD = Order | NI = Dose Not Indicated | R = Refused | O = Other

Registration #: 07540-085

Pt. Name: ORENA, VICTOR

**Medication Administration Record** 

Intering Regic (10 ML) 100 UNTSML injures intering surface (10 ML) 100 UNTSML injures into the partial results of regular installs results of regular installs results of regular installs results and each morning and the state of regular installs results and each morning and the state of regular installs results and each morning and the state of regular installs results and each morning and the state of regular installs results and each morning and the state of regular installs results and each morning and the state of regular installs results and each morning and the state of regular installs results and each morning and the state of regular installs results and each morning and the state of regular installs results and each morning and the state of regular installs results and each morning and the state of regular installs results and each morning and the state of regular installs results and each morning and the state of regular installs results and each morning and the state of regular installs results and each morning and the state of regular installs results and each morning and the state of regular installs results and each morning and each each morning and each morning and each morning and each each morning and each each each morning and each each each each each each each each	Medication Orders	Time 1 2	8	4 5	9	_	8	9 10	1	12	13 1	4	5 16	17	18	9 20	21	22	23 ;	24 2	25 26	3 27	28	29 3	30 3	31
	Churchville, Lawrence MD Inject 8 units of regular insulin subcutaneously			×		×			×				×	×			×	×	×			×	×			
No.   No.	<u> </u>																									
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	Churchville, Lawrence MD Inject 8 units of regular insulin subcutaneously			×	×	×			×				×	×			×	×	×			×	×			
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Providers: MAM = Mcclurken, M. | MZC = Charles-Washington, M. | SPR = Procaccini, S. | LGD = Duncan, L. | BF = Fadahunsi, B. | IMG = Montanez-Gonzalez, I. | KZH = Hatzidakis, K. | WJB = Babineau, W.

Documentation Codes: ORD = Order | NI = Dose Not Indicated | R = Refused | O = Other

Registration #: 07540-085

Pt. Name: ORENA, VICTOR

**Medication Administration Record** 

**MARCH 2025** 

30 31 × × × × 28 29 × × × 27 × × 22 23 24 25 26 × × × × × × × × × × 9 10 11 12 13 14 15 16 17 18 19 20 21 × × × × × × × × × × × × × × 0.08 MAM 06:24 × × 0.08 MAM 06:28 0.08 T7:1 × × 0.08 WJB 18:10 0.08 MAM 06:11 × × ∞ 0.08 WJB 16:23 × × 2 9 0.08 SPR 16:43 0.08 LGD 06:40 × × 0.08 MAM 06:10 × × 2 0.08 IMG 16:40 0.08 MAM 06:22 × × 4 0.08 SPR 16:57 × က × 2 × × × × × × Time 1700 0090 Churchville, Lawrence MD Inject 8 units of regular insulin subcutaneously Inject 8 units of regular insulin subcutaneously each morning Churchville, Lawrence MD Churchville, Lawrence MD Churchville, Lawrence MD Place 1 drop in both eyes each evening Place 1 drop in both eyes each evening Latanoprost Ophth Soln 0.005% [2.5ml] Insulin Reg (10 ML) 100 UNITS/ML Inj Insulin Reg (10 ML) 100 UNITS/ML Inj Medication Orders each evening Exp. Date 03/04/26 13:45 Exp. Date 03/04/26 13:45 Exp. Date 03/04/25 08:04 Exp. Date 03/04/25 13:48 Ord. Date 03/04/25 13:46 Ord. Date 03/04/25 Ord. Date 03/03/25 19:34 Ord. Date 02/26/25 675278-DEV 675279-DEV 674490-DEV 13:46 15:44

Providers: MAM = Mcclurken, M. | MZC = Charles-Washington, M. | SPR = Procaccini, S. | LGD = Duncan, L. | BF = Fadahunsi, B. | IMG = Montanez-Gonzalez, I. | KZH = Hatzidakis, K. | WJB = Babineau, W.

Documentation Codes: ORD = Order | NI = Dose Not Indicated | R = Refused | O = Other

Latanoprost Ophth Soln 0.005% [2.5ml]

675133-DEV

Registration #: 07540-085

Pt. Name: ORENA, VICTOR

**Medication Administration Record** 

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**MARCH 2025** 

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Providers: MAM = Mcclurken, M. | MZC = Charles-Washington, M. | SPR = Procaccini, S. | LGD = Duncan, L. | BF = Fadahunsi, B. | IMG = Montanez-Gonzalez, I. | KZH = Hatzidakis, K. | WJB = Babineau, W.

Documentation Codes: ORD = Order | NI = Dose Not Indicated | R = Refused | O = Other

Registration #: 07540-085

Pt. Name: ORENA, VICTOR

**Medication Administration Record** 

**MARCH 2025** 

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1	1 MAM 06:32								×				×			
10	1 MAM N 06:31 0	1 KZH 17:12							×				×			
6	1 MAM 10 06:18 0	1 WJB 1							×				*			
8	1 LGD 1	1 WJB 18:26							×				×			
7	1 LGD 06:42 (	1 SPR 18:34							×				×			
9	1 MAM 06:31	1 WJB 17:58							×				×			
5	1 MAM 06:26	1 IMG 19:06							×				×			
4	×	1 SPR 18:40			ORD MAM 06:20								SPR			
3	×	×			×								×			
2	×	×			×								×			
_	×	×			×								×			
Time	0	0			0								0			
_	0090	1900			0090								1100			
Medication Orders	Churchville, Lawrence MD Take one tablet (10 MG) by mouth twice daily			Memantine 10 MG Tab	Churchville, Lawrence MD Apply topically to the affected area(s) three	times daily (inguinal/groin, pannus) **non- formulary approved until: 4/2/25 x 30 day(s) Pill Line Only		Nystatin Powder 100,000 UNIT/GM [30 GM]	Churchville, Lawrence MD Apply topically to the affected area(s) three	times daily (inguinal/groin, pannus) **non- formulary approved until: 4/2/25		Nystatin Powder 100,000 UNIT/GM [30 GM]	Churchville, Lawrence MD Apply topically to the affected area(s) three	times daily (inguinal/groin, pannus) **non- formulary approved until: 4/2/25		Nystatin Powder 100,000 UNIT/GM [30 GM]
	Ord. Date 03/04/25 13:47	Exp. Date 08/31/25 13:46	DEV	675281- DEV	Ord. Date 03/03/25 19:34	Exp. Date 04/02/25 19:33	DEV	_	Ord. Date 02/26/25 15:44	Exp. Date 03/04/25 08:05	) 	91-	Ord. Date 03/03/25 19:34	Exp. Date 03/04/25 13:48	) VEV	35-

Providers: MAM = Mcclurken, M. | MZC = Charles-Washington, M. | SPR = Procaccini, S. | LGD = Duncan, L. | BF = Fadahunsi, B. | IMG = Montanez-Gonzalez, I. | KZH = Hatzidakis, K. | WJB = Babineau, W.

Documentation Codes: ORD = Order | NI = Dose Not Indicated | R = Refused | O = Other

Registration #: 07540-085

Pt. Name: ORENA, VICTOR

**Medication Administration Record** 

**MARCH 2025** 

31 × × 9 × × 53 × × × 28 × × × 27 × × × × 23 24 25 26 × × × × × × × × × × × × × × × × 22 × × × × 2 × × × 19 20 × × × × × × × 9 10 11 12 13 14 15 16 17 18 × × × × 0.71 MAM 06:32 × 0.71 MAM 06:31 0.71 MZC 10:42 0.71 KZH 17:12 × 0.71 MAM 06:18 0.71 WJB 11:30 0.71 WJB 18:12 × ∞ 0.71 LGD 06:31 0.71 WJB 15:02 0.71 WJB 18:26 × 0.71 LGD 06:42 0.71 SPR 10:54 0.71 SPR 18:34 × 9 0.71 MAM 06:31 ᇙ 0.71 WJB 17:58 × 2 0.71 MAM 06:26 0.71 IMG 10:30 0.71 IMG 19:06 × 4 S R × × က × × × 2 × × × × × × × × Time 0090 1100 1900 Churchville, Lawrence MD Churchville, Lawrence MD Take one tablet (20 MEQ) by mouth each day Apply topically to the affected area(s) three times daily (inguinal/groin, pannus) \*\*nonformulary approved until: 4/2/25 Nystatin Powder 100,000 UNIT/GM [30 GM] Medication Orders Exp. Date 03/18/25 13:47 Ord. Date 03/04/25 13:48 Ord. Date 03/04/25 00:00 675282-DEV

Exp. Date

×

03/04/25 13:50	DEV	675204- DEV	Ord. Date 03/10/25 11:41	Exp. Date 09/06/25 11:40	Ĺ	676143- DEV	Ord. Date 03/03/25 19:34	Exp. Date 04/02/25 19:33
		Potassium Chloride 20 mEq ER Tab UD	Churchville, Lawrence MD Take one tablet (20 MEQ) by mouth each day			Potassium Chloride 20 mEq ER Tab UD		e each day x 30 day(s) Pill Line Only
			0090				0090	
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	1		×				×	
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			1 MAM 06:32					
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Providers: MAM = Mcclurken, M. | MZC = Charles-Washington, M. | SPR = Procaccini, S. | LGD = Duncan, L. | BF = Fadahunsi, B. | IMG = Montanez-Gonzalez, I. | KZH = Hatzidakis, K. | WJB = Babineau, W.

Documentation Codes: ORD = Order | NI = Dose Not Indicated | R = Refused | O = Other

Spironolactone 25 MG Tab UD

Order DEV

Pt. Name: ORENA, VICTOR Registration #: 07540-085

**MARCH 2025** 

Time Medication Orders

**Medication Administration Record** 

	Medication Orders	Time	_	2	3 4	2	9	7	∞	9 10	0 11	112	13	4	15	16	17 1	18 1	19 2	20 21	1 22	2 23	3 24	25	26	27	28	29	30	31
Ord. Date 02/26/25 15:45	Churchville, Lawrence MD Take one-half (1/2) tablet (12.5 MG) by mouth					×	×	×	×	× ×	×	×	×	×	×	×	×	× ×	*	×	×	×	×	×	×	×	×	×	×	×
Exp. Date 03/04/25 08:15	each day																													
DEV																														
674492- DEV	Spironolactone 25 MG Tab UD																													
Ord. Date 03/03/25 19:34	Churchville, Lawrence MD Take one-half (1/2) tablet (12.5 MG) by mouth		×	×		×	×	×	×	× ×	×	×	×	×	×	×	×	× ×	*	×	×	×	×	×	×	×	×	×	×	×
Exp. Date 03/04/25 13:50	each day																													
DEV 675144- DEV	Spironolactone 25 MG Tab UD																													1
Ord. Date 03/04/25 13:49	Ω	0090	×	× ×	*	0.5 MAM 06:26	0.5 MAM 06:31	0.5 LGD 1 06:43 0	0.5 0. LGD MA 06:31 06:	0.5 0.5 MAM MAM 06:18 06:31	0.5 M MAM 11 06:32																			
Exp. Date 03/04/26 13:48	each day																													
DEV																														
675283- DEV	Spironolactone 25 MG Tab UD																													
Ord. Date 03/04/25 13:49	Churchville, Lawrence MD Take one capsule (0.4 MG) by mouth each day	0090	×	× ×	*	1 MAM 06:26	1 MAM 06:31	1 LGD 1 06:43 0	1 LGD MA 06:31 06:	1 1 MAM MAM 06:18 06:31	1 M MAM 11 06:32																			
Exp. Date 08/31/25 13:48																														
DEV																														
675284- DEV	Tamsulosin HCI 0.4 MG Cap UD																													

Providers: MAM = Mcclurken, M. | MZC = Charles-Washington, M. | SPR = Procaccini, S. | LGD = Duncan, L. | BF = Fadahunsi, B. | IMG = Montanez-Gonzalez, I. | KZH = Hatzidakis, K. | WJB = Babineau, W.

Documentation Codes: ORD = Order | NI = Dose Not Indicated | R = Refused | O = Other

Registration #: 07540-085

Pt. Name: ORENA, VICTOR

**Medication Administration Record** 

**MARCH 2025** 

31 × × × × × 30 × × × 53 × × × × 28 × × × × 27 × × × × × 22 23 24 25 26 × × × × × × × × × × × × × × × × × × 7 × × 19 20 × × × × 9 × × 10 11 12 13 14 15 16 17 × × × × × × × 0.54 MAM 06:32 × × 0.54 17:12 Z KZH 17:12 × × × 6 × × × × × ω × × × × × × × × × × 9 × × × × × 2 × × × × × 4 × × × က × × × 2 × × × × × × × × Time 0090 1900 1900 PRN PRN Fandreyer, F. FNP Churchville, Lawrence MD Fandreyer, F. FNP Churchville, Lawrence MD Apply a small amount topically to the affected area(s) of torso twice daily for 14 days Take one tablet (5 MG) by mouth each day AS NEEDED for constipation Take one tablet (5 MG) by mouth each day AS NEEDED for constipation Take two capsules (50 MG) by mouth at bedtime Triamcinolone 0.1% 15 GM Cream diphenhydrAMINE 25 MG Cap UD Medication Orders Bisacodyl E.C. 5 MG TAB UD Exp. Date 03/04/25 07:42 Exp. Date 03/24/25 Exp. Date 03/24/25 14:37 Ord. Date 03/10/25 14:38 Ord. Date 03/03/25 19:34 Ord. Date 02/26/25 Exp. Date 674481-DEV 676115-DEV 676276-DEV Ord. Date 675118-DEV 03/10/25 11:22 15:27

Providers: MAM = Mcclurken, M. | MZC = Charles-Washington, M. | SPR = Procaccini, S. | LGD = Duncan, L. | BF = Fadahunsi, B. | IMG = Montanez-Gonzalez, I. | KZH = Hatzidakis, K. | WJB = Babineau, W.

Documentation Codes: ORD = Order | NI = Dose Not Indicated | R = Refused | O = Other

Bisacodyl E.C. 5 MG TAB UD

Registration #: 07540-085

Pt. Name: ORENA, VICTOR

**Medication Administration Record** 

**MARCH 2025** 

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× × × × × × × × 22 23 24 25 26 × Time PRN PRN PRN PRN Churchville, Lawrence MD Churchville, Lawrence MD Churchville, Lawrence MD Take one capsule (100 MG) by mouth twice daily AS NEEDED for hard or infrequent stools - Take with a glassful of water Churchville, Lawrence MD Take one capsule (100 MG) by mouth twice daily AS NEEDED for hard or infrequent stools - Take with a glassful of water Take one capsule (100 MG) by mouth twice daily AS NEEDED for hard or infrequent stools Take one tablet (5 MG) by mouth each day AS NEEDED for constipation Docusate Sodium 100 MG Cap UD Docusate Sodium 100 MG Cap UD Docusate Sodium 100 MG Cap UD Medication Orders Take with a glassful of water Bisacodyl E.C. 5 MG TAB UD Exp. Date 08/31/25 Exp. Date 03/04/25 07:46 Ord. Date 02/26/25 Ord. Date 03/04/25 13:31 Exp. Date Exp. Date 675266-DEV 674485-DEV Ord. Date Ord. Date 03/04/25 13:31 675122-03/04/25 03/03/25 675270-13:25 15:29 19:34

Providers: MAM = Mcclurken, M. | MZC = Charles-Washington, M. | SPR = Procaccini, S. | LGD = Duncan, L. | BF = Fadahunsi, B. | IMG = Montanez-Gonzalez, I. | KZH = Hatzidakis, K. | WJB = Babineau,

Documentation Codes: ORD = Order | NI = Dose Not Indicated | R = Refused | O = Other

Registration #: 07540-085

Pt. Name: ORENA, VICTOR

**Medication Administration Record** 

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1 25	*				×								×			
3 24	×				×								×			
2 23	×				×								×			
1 22	*				×								*			
20 21	*				*								*			
6	× ×				× ×								× ×			
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Time	PRN				PRN				PRN				PRN			
Medication Orders	Churchville, Lawrence MD Chew and swallow 4 tablets (16 GM) by mouth	AS NEEDED for hypoglycemia and alert medical		Glucose 4 GM Tab	Churchville, Lawrence MD Chew and swallow 4 tablets (16 GM) by mouth	AS NEEDED for hypoglycemia and alert medical		Glucose 4 GM Tab	Churchville, Lawrence MD Chew and swallow 4 tablets (16 GM) by mouth	AS NEEDED for hypoglycemia and alert medical		Glucose 4 GM Tab	Churchville, Lawrence MD  Take one tablet (600 MG) by mouth twice daily	AS NEEDED for secretions related to for cough		guaiFENesin ER Tab 12 Hr 600 MG UD
		Exp. Date A 03/04/25 n 07:48	DFV	-88	Ord. Date 03/03/25 19:34	Exp. Date 603/04/25 n 13:43	DEV	27-	Ord. Date 03/04/25 13:43 C	ate 25	DEV	75-	Ord. Date 02/26/25 15:43 T		DEV	-68

Providers: MAM = Mcclurken, M. | MZC = Charles-Washington, M. | SPR = Procaccini, S. | LGD = Duncan, L. | BF = Fadahunsi, B. | IMG = Montanez-Gonzalez, I. | KZH = Hatzidakis, K. | WJB = Babineau, W.

Documentation Codes: ORD = Order | NI = Dose Not Indicated | R = Refused | O = Other

Registration #: 07540-085

Pt. Name: ORENA, VICTOR

**MARCH 2025** 

**Medication Administration Record** 

31	×	×			×				×				×			
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28	×	×			×				×				×			
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22	×	×			×				×				×			
21	×	×			×				×				×			
20	×	×			×				×				×			
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7	1 SPR 1 10:50	1 SPR 18:35			×								×			
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. 21	1 MAM 0 06:23	1 IMG 19:06											×			
4	1 SPR 18:40															
က																
- 2	×	×							×							
_	×	×							×							
Time	z	z			z				z				z			
,-	PRN	PRN			PRN				PRN				PRN			
Medication Orders	Churchville, Lawrence MD Take one tablet (600 MG) by mouth twice daily	AS NEEDED for secretions related to for cough **non-formulary approved until: 3/8/25		guaiFENesin ER Tab 12 Hr 600 MG UD	Churchville, Lawrence MD  Take one tablet (0.5 MG) by mouth each day	AS NEEDED for agitation		risperiDONE 0.5 MG Tab UD	Churchville, Lawrence MD  Take one tablet (0.5 MG) by mouth each day	AS NEEDED for agitation		risperiDONE 0.5 MG Tab UD	Churchville, Lawrence MD  Take one tablet (50 MG) by mouth at bedtime	AS NEEDED for agitation		traZODone HCl 50 MG Tab UD
	Ord. Date 03/03/25 19:34	Exp. Date 03/08/25 7	DEV	-82	Ord. Date 01/31/25 10:08	Exp. Date 03/05/25 06:47	DEV	37-	Ord. Date 03/03/25 19:34	Exp. Date 03/17/25 19:33	DEV	53-	Ord. Date 01/31/25 10:08		DEV	38-

Providers: MAM = Mcclurken, M. | MZC = Charles-Washington, M. | SPR = Procaccini, S. | LGD = Duncan, L. | BF = Fadahunsi, B. | IMG = Montanez-Gonzalez, I. | KZH = Hatzidakis, K. | WJB = Babineau, W.

Documentation Codes: ORD = Order | NI = Dose Not Indicated | R = Refused | O = Other

Registration #: 07540-085

Pt. Name: ORENA, VICTOR

Ord. Date 03/03/25		PRN ×	1 IMG 19:06		
Exp. Date 04/02/25 19:33	AS NEEDED for agitation				
) FV					
675145- DEV	traZODone HCI 50 MG Tab UD				
		Medica	cation /	tion Administration Record	ord MARCH 2025
RX#:		Date: PillLine:	Provider:	Entered Date:	Comments:
67512	6/4484-DEV	JZ5 736	7 7 7 9	03/04/2025 16:56 EST	duplicate am order
67526		025 Pill Line 1	MAM	03/05/2025 06:26 EST	duplicate
Provid	lers: MAM = Mcclurken, M.   MZC = Charles-W	shington, M.   SPR = Pro	caccini, S.   LC	3D = Duncan, L.   BF = Fadahunsi, I	Providers: MAM = Mcclurken, M.   MZC = Charles-Washington, M.   SPR = Procaccini, S.   LGD = Duncan, L.   BF = Fadahunsi, B.   IMG = Montanez-Gonzalez, I.   KZH = Hatzidakis, K.   WJB = Babineau, W.
Docur	Documentation Codes: ORD = Order   NI = Dose Not Indicated   R = Refused   O =	Indicated   R = Refused	O = Other		
Regi	Pt. Name: ORENA, VICTOR Registration #: 07540-085 DOB: 08/04/34	4/34		Allergies:Topamax Report information is current a	Allergies:Topamax Report information is current as of the date and time of printing: 03/11/2025 09:20 EST
Provider W.	s: MAM = Mcclurken, M.   MZC = Charles-Wasl	ington, M.   SPR = Proca	ccini, S.   LGD	= Duncan, L.   BF = Fadahunsi, B.	Providers: MAM = Mcclurken, M.   MZC = Charles-Washington, M.   SPR = Procaccini, S.   LGD = Duncan, L.   BF = Fadahunsi, B.   IMG = Montanez-Gonzalez, I.   KZH = Hatzidakis, K.   WJB = Babineau, W.
Docume	Documentation Codes: ORD = Order   NI = Dose Not Indicated   R = Refused   O = Other	dicated   R = Refused   O	= Other		
Registra	Registration #: 07540-085 Pt. Name: ORENA, VICTOR	t, VICTOR		DC	DOB: 08/04/34

**Medication Administration Record** 

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Time

ORENA, VICTOR
Medication Orders

07540-085

**MARCH 2025** 

# Bureau of Prisons Health Services

# **Devices and Equipment**

				שיים בישמיף		
Start Date: 0	03/01/2025		Stop Date:	te: 03/11/2025		
<b>Reg</b> #: 0	07540-085		Inmate !	Inmate Name: ORENA, VICTOR	CTOR	
Device/Equipment	nent	Start Date	Stop Date	Date Returned	Obtained From	Comments
Cushion: Roho 04/22/2024 15	Sushion: Roho 04/22/2024 15:21 EST Kimball, A. OTR	04/22/2024	07/22/2024		BOP	due to pressure ulcer on buttock
Cushion: foam/gel	H C L				(	
01/13/2023 14:39 EST	⊦:39 EST Kimball, Alexandra OTR/L	10/22/2020			ВОР	standard w/c cushion exchanged 1/13/23
10/22/2020 13:44 EST	3:44 EST Kimball, Alexandra OTR/L	10/22/2020			BOP	
Walker						
11/03/2022 07:46 EST	r:46 EST Kimball, Alexandra OTR/L	07/19/2018	05/03/2023		вор	4 wheeled walker - reissued 3/14/22 2 wheeled walker exchanged for 4 wheeled walker on 11/3/22
06/10/2022 11:31 EST	:31 EST Kimball, Alexandra OTR/L	07/19/2018	11/16/2022		BOP	4 wheeled walker - reissued 3/14/22
03/14/2022 08:51 EST		07/19/2018	07/19/2019		BOP	4 wheeled walker - reissued 3/14/22
07/19/2018 15:06 EST		07/19/2018	07/19/2019		BOP	4 wheeled walker
Magnifier 02/27/2018 12	Magnifier 02/27/2018 12:30 EST Leslie Pariseau, L. RN	02/27/2018			BOP	Lux 3.0
Glucose Meter 05/16/2017 12	Slucose Meter 05/16/2017 12:12 EST Poitras, S. RN	05/16/2017			BOP	SN: EL339077
Splint 07/12/2016 10	Splint 07/12/2016 10:07 EST Williams, Constance OT	07/12/2016	07/12/2017		ВОР	R XL wrist splint
Splint 06/13/2016 07	Splint 06/13/2016 07:43 EST Anderson, M. Chief PT 06/09/2016	06/09/2016	06/09/2017		BOP	Large L Wrist splint
Glucose Meter 05/16/2017 12:12 EST 12/15/2015 12:32 EST	2:12 EST Poitras, S. RN	12/15/2015	05/16/2017		BOP	XEGU295-P03C7 XEGI1295-P03C7
Generated 03/11/20		sst	Δ.	Bureau of Prisons - DEV	5	Page 1 of 3

Start Date: Reg #:	03/01/2025 07540-085		Stop Date: Inmate Nar	Stop Date: 03/11/2025 Inmate Name: ORENA, VICTOR	CTOR	
Device/Equipment	uipment RN/QA/ID Coord	Start Date	Stop Date	Date Returned	Obtained From	Comments
Wheelchair 08/24/2015	Wheelchair 08/24/2015 09:47 EST Zalno, Beth PA-C	08/24/2015			BOP	
Eye Glasses 12/17/2014	Eye Glasses 12/17/2014 13:47 EST Gosa, S. PA-C	12/17/2014			BOP	Reading glasses re; 2.50 strength.
Wheelchair 08/24/2015 11/26/2013	Wheelchair 08/24/2015 09:47 EST Zalno, Beth PA-C 11/26/2013 07:20 EST Shellenberger, Megan PA-C	<del>11/26/2013</del> 11/26/2013	<del>03/28/2014</del> 03/28/2014		BOP	d/c
Cane						
09/18/2013	09/18/2013 14:22 EST Powanda. Micki PA-C	09/18/2013	02/29/2016		ВОР	duplicate
02/28/2012 08/26/2009		03/18/2009 03/18/2009	02/18/2010 02/18/2010		BOP BOP	-
03/18/2009 03/18/2009	03/18/2009 15:36 EST Seda, Margarita RN 03/18/2009 15:15 EST Seda, Margarita RN	03/18/2009 03/18/2009	06/18/2009		BOP BOP	Mr. Orena will be re-evaluated within 3 months.
Medical Shoes	sec					
07/24/2024	07/24/2024 14:37 EST Dautrich, Jeremy PT,	09/18/2013			BOP	7 M orthofeet reissued 7/23/24
06/10/2022	DF1 06/10/2022 11:31 EST Kimball, Alexandra OTR/I	09/18/2013			BOP	New issue 10/15/2015
10/15/2015		09/18/2013	10/15/2016		BOP	New issue 10/15/2015
11/13/2014 09/18/2013	11/13/2014 12:57 EST Gosa, S. PA-C 09/18/2013 14:22 EST Powanda. Micki PA-C	09/18/2013 09/18/2013	11/13/2015 09/18/2014		BOP BOP	New issue 11/13/2014
02/28/2012		02/15/2011	02/15/2013		BOP	Issued one pair of Acor, low top, medical shoes, size 10
02/15/2011	02/15/2011 10:15 EST Saunders, Brian PT	02/15/2011	02/15/2012		BOP	ા/ટ wide Issued one pair of Acor, low top, medical shoes, size 10
08/26/2009	08/26/2009 11:49 EST McCollum, William	05/11/2009	05/11/2009		BOP	1/2 WIGE
05/11/2009	MID, CD 05/11/2009 11:42 EST Pierce, Judi LPN	05/11/2009	05/11/2010		BOP	
Wheelchair	Wheelchair	07/13/2013			Wod ON	
Cane						

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	Start Date 07/09/2013 07/09/2013 07/09/2013 12/07/2009 10/22/2009 10/22/2009	Stop Date:    Inmate Nan	Stop Date: 03/11/2025 Inmate Name: ORENA, VICTOR  Date Date Returned Obtain 80P 80P 80P 80P 80P 80P 80P 80P	Obtained From BOP BOP BOP Cother Other	Comments - inmate reported to swing at CO, replaced by walker Pacemaker placed 10/20/09 Pacemaker placed 10/20/09  XCE171-2025not indicated
02/28/2012 14:39 EST Tabor, Timothy PA-C 08/25/2009 11:12 EST Junkermeier, Tanya RN	08/25/2009 08/25/2009			BOP	XCE171-2025 XCE171-2025

#### Bureau of Prisons Health Services Allergies

Reg #: 07540-085 Inmate Name: ORENA, VICTOR

Allergy <u>Date Noted</u> <u>Reaction</u>

Topamax 11/20/2007 Intolerance-other

RXN UNKNOWN

Orig Entered: 11/20/2007 13:03 EST Williams, Nekia A. PharmD

## Bureau of Prisons Health Services

### Alerts

Reg #: 07540-085	nmate Name: O	ORENA, VICTOR
Alert	Start Date	Stop Date Comments
Serious Illness/Critical Illness		
05/16/2014 10:31 EST Kahley, Charles LPN	11/22/2013	05/16/2014 CL3: s/p DDD pacemaker
11/22/2013 14:22 EST Santos, Elizabete	11/22/2013	CL3: s/p DDD pacemaker
D.O., Clinical Director		

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He named his son, Victor Arena (516-303-2813), as his health care proxy and h	Arena (516-754-6407) as his Alternate Agent.
09/10/2019	
09/10/2019 12:07 EST Rasmussen, S.	LICSW

his son Andrew

# Implanted Electronic Device

St Jude Serial # 7437604	Implanted 12/19/13	
06/28/2016		
06/28/2016 15:11 EST Hartshorn, Christine	Contract Consultant	Scheduler

# Serious Illness/Critical Illness

CL3: s/p DDD pacemaker	
04/09/2015	
Long, Michelle LPN	
04/09/2015 10:47 EST Long, Michelle LPN	

# Care Level 3

CL3: s/p DDD pacemaker 05/16/2014 05/16/2014 10:31 EST Kahley, Charles LPN

# **Bureau of Prisons Health Services**

# Patient Education Assessments & Topics

Inmate Name: ORENA, VICTOR Reg #: 07540-085

# **Assessments**

**Provider** Barriers To Education Years of Education Primary Language Assessment Date Learns Best By

Total: 0

## **Topics**

Fandreyer, F. Provider Needs Reinforcement Outcome Handout/Topic Diagnosis Counseling Format Date Initiated 03/10/2025

Orig Entered: 03/10/2025 11:12 EST Fandreyer, F.

Verbalizes Understanding Compliance - Treatment Counseling 03/10/2025

Churchville, Lawrence

Mcclurken, Mark

Verbalizes Understanding

Churchville, Lawrence

No Evidence of Learning

No Participation

Babineau, William

Orig Entered: 03/10/2025 11:38 EST Churchville, Lawrence

Discussed importance of getting sleep in bed/keeping nasal cannula on Compliance - Treatment Counseling 03/04/2025

Orig Entered: 03/04/2025 05:45 EST Mcclurken, Mark

None/Severe Cogn

03/04/2025

Orig Entered: 03/04/2025 12:44 EST Churchville, Lawrence

Not Done 03/03/2025

Orig Entered: 03/03/2025 19:49 EST Babineau, William

# Bureau of Prisons Health Services Blood Glucose

Begin Date: 03/01/2025	03/01/2025	End Date:	03/11/2025
Reg #:	07540-085	Inmate Name:	ORENA, VICTOR
(Reference R	tange: Random or Fasting 70	(Reference Range: Random or Fasting 70 - 100, 2 hour post-prandial 70 - 140)	
<u>Date</u>	<u>Time</u> <u>Value</u>	Type	Comments
03/11/2025	06:55 DEV 140	Random	qq
Orig Ente	Orig Entered: 03/11/2025 06:56 EST Mcclurken, Mark RN	Mcclurken, Mark RN	
03/10/2025	03/10/2025 06:38 DEV 152	Random	qq
Orig Ente	Orig Entered: 03/10/2025 06:39 EST Mcclurken, Mark RN	Mcclurken, Mark RN	
03/09/2025	03/09/2025 18:08 DEV 174	Random	qq
Orig Ente	Orig Entered: 03/09/2025 18:10 EST Babineau, William RN	Babineau, William RN	
03/09/2025	03/09/2025 06:35 DEV 139	Random	qq
Orig Ente	Orig Entered: 03/09/2025 06:36 EST Mcclurken, Mark RN	Mcclurken, Mark RN	
03/08/2025	03/08/2025 16:22 DEV 142	Random	qq
Orig Ente	Orig Entered: 03/08/2025 16:23 EST	Babineau, William RN	
03/08/2025	03/08/2025 06:42 DEV 143	Random	qq
Orig Ente	Orig Entered: 03/08/2025 06:43 EST	Duncan, L. RN	
03/07/2025	03/07/2025 06:52 DEV 155	Random	BB
Orig Ente	Orig Entered: 03/07/2025 06:53 EST	Duncan, L. RN	
03/05/2025	03/05/2025 16:39 DEV 121	Unknown	BB
Orig Ente	red: 03/05/2025 16:40 EST	Orig Entered: 03/05/2025 16:40 EST Montanez-Gonzalez, Islem RN	
03/05/2025	03/05/2025 06:34 DEV 119	Random	qq
Orig Ente	Orig Entered: 03/05/2025 06:35 EST Mcclurken, Mark RN	Mcclurken, Mark RN	
03/04/2025	03/04/2025 16:58 DEV 201	Unknown	qq
Orig Ente	Orig Entered: 03/04/2025 16:59 EST Procaccini, Sherri RN	Procaccini, Sherri RN	
03/04/2025	03/04/2025 06:37 DEV 243	Random	qq
Orig Ente	Orig Entered: 03/04/2025 06:38 EST Mcclurken, Mark RN	Mcclurken, Mark RN	

Total: 11

## Bureau of Prisons Health Services Health Problems

Axis         Code Type         Code           Current         III ICD-9         250.00           III ICD-9         272.2           III ICD-9         272.2           III ICD-9         365.23           III ICD-9         365.23           III ICD-9         365.23           III ICD-9         401.1           III ICD-9         401.1           III ICD-9         426.0           III ICD-9         426.0           III ICD-9         426.0           III ICD-9         441.9           III ICD-9         441.9	Reg #: 07540-085 Inmate Name: ORENA, VICTOR				
III   ICD-9   250.00   III   ICD-9   250.00   III   ICD-9   272.2   III   ICD-9   272.2   III   ICD-9   272.2   III   ICD-9   365.23   III   ICD-9   365.23   III   ICD-9   365.23   III   ICD-9   365.23   III   ICD-9   401.1   III   ICD-9   401.1   III   ICD-9   426.0   426.0   426.0   426.0   426.0   III   ICD-9   441.9   III   ICD-9	Description	l		Diag. Date Status	Status Date
II   ICD-9   250.00   III   ICD-9   272.2   III   ICD-9   272.2   III   ICD-9   272.2   III   ICD-9   272.2   III   ICD-9   365.23   III   ICD-9   365.23   III   ICD-9   365.23   III   ICD-9   401.1   III   ICD-9   401.1   III   ICD-9   426.0   426.0   III   ICD-9   441.9   III   ICD-9	Current				
II   ICD-9   250.00   1   ICD-9   250.00   1   ICD-9   272.2	Diabetes mellitus, type II (adult-onset)				
III   ICD-9   272.2   III   ICD-9   272.2   III   ICD-9   272.2   III   ICD-9   272.2   III   ICD-9   365.23   III   ICD-9   365.23   III   ICD-9   365.23   III   ICD-9   367.4   401.1   III   ICD-9   401.9   III   ICD-9   III	07/06/2010 15:19 EST Wilson, William E. MD		250.00	09/01/2009 Current	09/01/2009
	09/01/2009 12:46 EST McCollum, William MD, CD		250.00	09/01/2009 Current	09/01/2009
II   ICD-9   272.2   III   ICD-9   272.2   III   ICD-9   357.2   III   ICD-9   365.23   III   ICD-9   365.23   III   ICD-9   367.4   401.1   III   ICD-9   III   ICD-9   401.1   III   ICD-9	Hyperlipidemia, mixed				
III   ICD-9   357.2	07/06/2010 15:19 EST Wilson, William E. MD		272.2	01/23/2009 Current	01/23/2009
III   ICD-9   357.2   III   ICD-9   365.23   III   ICD-9   365.23   III   ICD-9   365.23   III   ICD-9   367.4   401.1   III   ICD-9   401.1   III   ICD-9   426.0   426.0   III   ICD-9   441.9   III   ICD-9   III   ICD	01/23/2009 08:10 EST Cintron, Miguel A MD		272.2	01/23/2009 Current	01/23/2009
II   ICD-9   365.23   III   ICD-9   365.23   III   ICD-9   365.23   III   ICD-9   365.23   III   ICD-9   367.4   401.1   III   ICD-9   401.1   III   ICD-9   401.1   III   ICD-9   401.1   III   ICD-9   426.0   426.0   III   ICD-9   441.9   III   ICD-9   III   ICD	Polyneuropathy in diabetes				
(decreased over 3rd MTPJ) and 8/10 on right    III   ICD-9 365.23   III   ICD-9 367.4   401.1   III   ICD-9   401.1   III   ICD-9   426.0   426.0   III   ICD-9   426.0   III   ICD-9   441.9   III   ICD-9   III   IC	12/10/2015 13:44 EST Cure, Julie PA-C		357.2	12/10/2015 Current	12/10/2015
	MONOFILAMENT exam- Left foot 9/10 (decreased over 3rd MTPJ) and 8/10 on foot (decreased over 3rd and 5th MTPJ)	ight			
	Chronic angle-closure glaucoma				
II   ICD-9 365.23   367.4	07/06/2010 15:19 EST Wilson, William E. MD		365.23	08/22/2008 Current	08/22/2008
III   ICD-9   401.1   101.1   102.9   401.1   102.9   401.1   102.9   401.1   102.0   426.0   426.0   100k at cardiology consultation dated   102.9   441.9   102.9   102.9   102.9   103.0	08/22/2008 11:31 EST Cintron, Miguel A MD		365.23	08/22/2008 Current	08/22/2008
III   ICD-9   401.1   III   ICD-9   401.1   III   ICD-9   401.1   III   ICD-9   426.0   426.0   III   ICD-9   441.9   III   ICD-9   II	Presbyopia				
	04/23/2014 10:59 EST Weyand, James OD		367.4	04/23/2014 Current	04/23/2014
III   ICD-9   401.1   101.1   102.9   401.1   102.9   401.1   401.1   404.1	Hypertension, Benign Essential				
, Clinical III ICD-9 401.1 c. Adapta ADDRO1, serial #NWB450391H with /20/09. (look at cardiology consultation dated III ICD-9 426.0 III ICD-9 441.9	10/08/2010 11:09 EST Wilson, William E. MD		401.1	08/10/2009 Current	08/10/2009
, Clinical III ICD-9 426.0 Adapta ADDRO1, serial #NWB450391H with /20/09. (look at cardiology consultation dated III ICD-9 426.0 III ICD-9 441.9	08/10/2009 11:47 EST Cacho, Jaime MLP		401.1	08/10/2009 Current	08/10/2009
, Clinical III ICD-9 426.0 c. Adapta ADDRO1, serial #NWB450391H with /20/09. (look at cardiology consultation dated III ICD-9 426.0 III ICD-9 441.9	Atrioventricular block, complete				
Adapta ADDRO1, serial #NWB450391H with /20/09. (look at cardiology consultation dated III ICD-9 426.0 III ICD-9 III ICD-9 441.9	07/09/2013 10:10 EST Santos, Elizabete D.O., Clinical Director	III ICD-9	426.0	10/21/2009 Current	10/21/2009
III ICD-9 426.0 III ICD-9 441.9 III ICD-9 441.9	permanent pacemaker placed Medtronic Adapta ADDRO1, serial #NWB4503911	with			
ICD-9 426.0       ICD-9 441.9	Capsule FIX NOVUS 4070-45 CITTEAU 10/20/03. (1008 at caluiology cortsultation of 1/4/2010 for more information.)	nen			
III ICD-9 441.9 09/28/2011 III ICD-9 441.9 09/28/2011	10/21/2009 13:33 EST Aulepp, Kristine DO		426.0	10/21/2009 Current	10/21/2009
III ICD-9 441.9 09/28/2011 III ICD-9 441.9 09/28/2011	permanent pacemaker placed 10/20/09				
III ICD-9 441.9 09/28/2011 III ICD-9 441.9 09/28/2011	Aortic aneurysm of unspecif site without rupture				
III ICD-9 441.9	07/23/2019 09:34 EST Murray, Scott MD		441.9	09/28/2011 Current	09/28/2011
0. − 1+1	AAA (s/p repair 6/2019)		0 7 7 7	00/00/0014 Current	00/28/2014
5.5 cm (9/2017). 6 month FU CTA and V surg eval.	5.5 cm (9/2017). 6 month FU CTA and V surg eval.		D:  -  -  -  -		1 102/02/60

Page 1 of 14

Bureau of Prisons - DEV

Reg #: 07540-085 Inmate Name: ORENA, VICTOR					
Description 01/07/2014 12:01 EST Santos, Elizabete D.O., Clinical	Axis =	Code Type ICD-9	<b>Code</b> 441.9	Diag. Date Status 09/28/2011 Current	<b>Status Date</b> 09/28/2011
Difector 09/28/2011 12:41 EST Wilson, William E. MD/CD 9-2011: REFERRED TO VASCUALR SURGERY- CONSULT FOR ENDOGRAFT REQUESTED	≡ \FT	ICD-9	441.9	09/28/2011 Current	09/28/2011
Constipation, unspecified					
02/13/2025 14:44 EST Fandreyer, F. FNP	=	ICD-9	564.00	09/18/2013 Current	02/13/2025
10/25/2016 13:01 EST Hardy, William MD	Ξ	ICD-9	564.00		10/25/2016
09/18/2013 14:16 EST Powanda, Micki PA-C	=	ICD-9	564.00	09/18/2013 Current	09/18/2013
Benign localized hyperplasia of prostate NOS 02/09/2011 13:06 EST Wilson, William E. MD	=	6-QOI	600.20	02/09/2011 Current	02/09/2011
Osteoarthrosis, generalized					
07/23/2019 09:34 EST Murray, Scott MD	≡	ICD-9	715.0	08/22/2008 Current	08/22/2008
bil knee OA 08/22/2008 11:31 EST Cinfron Miauel A MD	=	ICD-9	7150	08/22/2008 Current	08/22/2008
LTBI Prophy Refused					
06/14/2024 11:56 EST Smithart, Peggy OIIC RN see refusal form dated 6/14/24	≡	ICD-10	795.5D	06/14/2024 Current	
Tinea cruris					
10/19/2020 15:08 EST Murray, Scott MD bil inguinal. not responding to topical miconazole or powder. responsive to		ICD-10	B356	01/10/2020 Current	
ketoconazole. 07/21/2020 16:27 EST Murray, Scott MD		ICD-10	B356	01/10/2020 Current	
bil inguinal					
01/10/2020 18:13 EST Murray, Scott MD L axilla		ICD-10	B356	01/10/2020 Current	
Iron deficiency anemia					
12/27/2022 11:31 EST Goudreau, Shea PA-C		ICD-10	D209	12/27/2022 Current	
Anemia, unspecified 12/21/2017 15:17 EST Fandreyer, F. FNP		ICD-10	D649	12/21/2017 Current	
Vitamin B deficiency 07/23/2019 09:51 EST Murray, Scott MD		ICD-10	E539	07/23/2019 Current	
Vitamin D deficiency 02/09/2018 17:26 EST Coffey, C. PA-C		ICD-10	E559	02/09/2018 Current	
Generated 03/11/2025 09:20 by Magnusson, Cheryl Legal Asst	sons - DE	<b>&gt;</b> :			Page 2 of 14

Reg #: 07540-085 Inmate Name: ORENA, VICTOR				
Description	Axis Code Type	Code	Diag. Date Status	Status Date
01/14/2018 17:17 EST Cooke, Robert PA-C	ICD-10	F0391	01/14/2018 Current	
Alzheimer's disease 03/15/2018 10:39 EST Warinner, P. MD	ICD-10	6309	03/15/2018 Current	
GAF 71 - 100 11/02/2012 12:47 EST Bailey, T. MD	III ICD-9	G4	11/02/2012 Current	11/02/2012
Low vision, both eyes 07/15/2016 13:14 EST Howard, Charles MD Glaucomatous Optic Atrophy, Count Fingers OD, 20/60 at best OS. s/p cataracts with	ICD-10 s with	H542	07/15/2016 Current	
nens implants. Non-ST elevation (NSTEMI) myocardial infarction 12/27/2022 10:48 EST Goudreau, Shea PA-C s/p PCI to LAD	ICD-10	1214	12/27/2022 Current	
Cardiomyopathy 12/07/2020 16:38 EST Murray, Scott MD EF 45% 2018 echo, unchanged ct 2011 echo. cath 2009: no obstructive disease. nuc	ICD-10 nuc	1429	05/11/2018 Current	
stress 2018: small reversible at apex. echo 2020 EF 30% 07/23/2019 09:34 EST Murray, Scott MD EF 45% 2018 echo, unchanged ct 2011 echo. cath 2009: no obstructive disease. nuc	ICD-10 nuc	1429	05/11/2018 Current	
stress 2018: small reversible at apex 05/11/2018 09:31 EST  Ofman, Peter MD	ICD-10	1429	05/11/2018 Current	
Other heart failure 12/29/2022 15:09 EST Ruze, P. (MAT) MD	ICD-10	15089	12/29/2022 Current	
Allergic rhinitis 10/26/2022 10:09 EST Fandreyer, F. FNP	ICD-10	1309	10/26/2022 Current	
Unspecified hemorrhoids 02/13/2025 14:44 EST Fandreyer, F. FNP	ICD-10	K649	02/13/2025 Current	
Unspecified abnormalities of heart beat 10/09/2017 10:22 EST Cooke, Robert PA-C	ICD-10	R009	10/09/2017 Current	
Rash and other nonspecific skin eruption 03/10/2025 10:58 EST Fandreyer, F. FNP	ICD-10	R21	03/10/2025 Current	
Presence of cardiac pacemaker 01/04/2021 17:30 EST Murray, Scott MD DDD pacemaker (St.Jude/Abbott). no aicd curently	ICD-10	Z950	01/04/2021 Current	

Page 3 of 14

Bureau of Prisons - DEV

Reg #: 07540-085 Inmate Name: ORENA, VICTOR				
Description	Axis Code Type	Code	Diag. Date Status	Status Date
Rem	Remission			
Mild cognitive impairment, so stated				
07/23/2019 09:34 EST Murray, Scott MD		331.83	10/15/2015 Remission	07/23/2019
10/15/2015 16:12 EST Gosa, S. PA-C	III ICD-6	331.83	10/15/2015 Current	10/15/2015
Tear film insufficiency, unspecified				
05/12/2016 16:12 EST Howard, Charles MD	III ICD-9	375.15	05/12/2015 Remission	05/12/2016
05/12/2015 10:59 EST Gosa, S. PA-C	III ICD-9	375.15	05/12/2015 Current	05/12/2015
Benign paroxysmal positional vertigo				
07/23/2019 09:34 EST Murray, Scott MD	III ICD-9	386.11	06/22/2011 Remission	07/23/2019
06/22/2011 12:29 EST Wilson, William E. MD/CD	III ICD-9	386.11	06/22/2011 Current	06/22/2011
Allergic rhinitis, cause unspecified				
10/25/2016 13:01 EST Hardy, William MD	III ICD-9	477.9	11/18/2010 Remission	10/25/2016
11/18/2010 12:10 EST Klink, Kimberly MS, FNP	III ICD-9	477.9	11/18/2010 Current	11/18/2010
Retained dental root				
07/23/2019 09:34 EST Murray, Scott MD	III ICD-9	525.3	02/16/2010 Remission	07/23/2019
02/16/2010 13:21 EST Shepherd, Doug DMD	III ICD-9	525.3	02/16/2010 Current	02/16/2010
Retained dental root				
07/23/2019 09:34 EST Murray, Scott MD	III ICD-9	525.3	01/26/2009 Remission	07/23/2019
01/26/2009 11:21 EST Onugha, Godfrey DDS	III ICD-9	525.3	01/26/2009 Current	01/26/2009
Esophageal reflux				
12/17/2019 17:08 EST Murray, Scott MD	III ICD-9	530.81	03/19/2015 Remission	12/17/2019
07/23/2019 09:34 EST Murray, Scott MD	6-QOI III	530.81	03/19/2015 Current	03/19/2015
ula uc ramitume 03/19/2015 08:28 EST Gosa, S. PA-C	III ICD-9	530.81	03/19/2015 Current	03/19/2015
Diverticulitis of colonw/o mention of hemorrhage				
04/28/2016 14:23 EST Hojnoski, Jon MD	III ICD-9	562.11	05/07/2010 Remission	04/28/2016
05/07/2010 13:36 EST Wilson, William E. MD	III ICD-9	562.11	05/07/2010 Current	05/07/2010
Chronic kidney disease, Stage III (moderate)				
04/28/2016 14:23 EST Hojnoski, Jon MD	III ICD-9	585.3	01/07/2015 Remission	04/28/2016
01/07/2015 10:57 EST Santos, Elizabete D.O., Clinical	6-QOI III	585.3	01/07/2015 Current	01/07/2015
Other malaise and fatique				
04/28/2016 14:23 EST Hojnoski, Jon MD	III ICD-9	780.79	02/18/2016 Remission	04/28/2016
02/18/2016 14:52 EST Riley, E. NP-C	III ICD-9	780.79	02/18/2016 Current	02/18/2016
Generated 03/11/2025 09:20 by Magnusson, Cheryl Legal Asst	Bureau of Prisons - DEV			Page 4 of 14

Reg #: 07540-085 Inmate Name: ORENA, VICTOR				
Description	Axis Code Type	Code	Diag. Date Status	Status Date
Diarrhea 04/28/2016 14:23 EST Hojnoski, Jon MD 09/15/2015 14:19 EST Hemphill, J. PA-C	6-ΩΩ-9 Ⅲ ICΩ-9	787.91	09/15/2015 Remission 09/15/2015 Current	04/28/2016
Psychosocial and environmental problems 07/23/2019 09:34 EST Murray, Scott MD 11/02/2012 12:47 EST Bailey, T. MD	IV ICD-9	Axis IV Axis IV	11/02/2012 Remission 11/02/2012 Current	07/23/2019 11/02/2012
Res	Resolved			
		0		
02/23/2016	6-02	102.2 102.2	05/03/2011 Resolved 05/03/2011 Resolved	09/19/2011 09/19/2011
05/03/2011 10:37 EST Tabor, Timothy PA-C	III ICD-9	102.2	05/03/2011 Current	05/03/2011
Dermatophytosis of the body (Tinea imbricata)				
10/25/2016 13:01 EST Hardy, William MD	6-Q2  III	110.5	04/03/2013 Resolved	10/25/2016
04/03/2013 12:33 E31 Bailey, 1: MiD		0.0		04/03/2013
02/23/2016 07:20 EST_SYSTEM Dunicate ICD 9	6-CD-III	250.02	08/22/2008 Resolved	12/10/2015
12/10/2015 13:46 EST Cure, Julie PA-C	III ICD-9	250.02	08/22/2008 Resolved	12/10/2015
12/10/2015 13:36 EST Cure, Julie PA-C 09/01/2009 12:46 EST McCollum, William MD, CD	ICD-9    ICD-9	250.02 250.02	08/22/2008 Current 08/22/2008 Resolved	12/10/2015 08/22/2008
Non compliance with diet				
08/22/2008 11:39 EST Cintron, Miguel A MD Non compliance with diet	III ICD-6	250.02	08/22/2008 Current	08/22/2008
08/22/2008 11:31 EST Cintron, Miguel A MD	III ICD-9	250.02	08/22/2008 Current	08/22/2008
Anxiety state, unspecified				
02/23/2016 07:20 EST SYSTEM	l ICD-9	300.00	02/24/2009 Resolved	02/24/2009
ш	III ICD-9	300.00	02/24/2009 Resolved	02/24/2009
ш	III ICD-9	300.00	02/24/2009 Current	02/24/2009
Vitals WNL EKG no change.				
lension neadache				

Page 5 of 14

Bureau of Prisons - DEV

Reg #: 07540-085 Inmate Name: ORENA, VICTOR				
Description	Axis Code Type	Code	Diag. Date Status	Status Date
02/23/2016 07:20 EST SYSTEM	I ICD-9	307.81	12/30/2009 Resolved	03/08/2013
03/08/2013 10:14 EST Tabor, Timothy PA-C	I ICD-9	307.81	12/30/2009 Resolved	03/08/2013
12/30/2009 09:00 EST Pettit, Matthew FNP-BC	III ICD-9	307.81	12/30/2009 Current	12/30/2009
Bell's palsy				
02/23/2016 07:20 EST SYSTEM	III ICD-9	351.0	06/19/2013 Resolved	12/10/2015
Left side 12/10/2015 13:36 EST  Cure, Julie PA-C	III ICD-9	351.0	06/19/2013 Resolved	12/10/2015
Left side 06/19/2013 10:52 EST Blila, Christopher FNP-C	III ICD-9	351.0	06/19/2013 Current	06/19/2013
Panuveitis				
05/12/2016 16:12 EST Howard, Charles MD OS DID NOT HAVE PANUVEITIS. He had Allergic conjunctivitis from Brimonidine. C.	III ICD-9 Idine. C.	360.12	05/13/2013 Resolved	05/12/2016
Howard, Upntnalmology 05/13/2013 09:46 EST Blila, Christopher FNP-C OS	III ICD-9	360.12	05/13/2013 Current	05/13/2013
Nonexudative senile macular degeneration				
05/12/2016 16:12 EST Howard, Charles MD	III ICD-9	362.51	03/26/2014 Resolved	05/12/2016
UIU/DUES NOT HAVE. C. Howard Opnthalmology 03/26/2014 11:49 EST Weyand, James OD	III ICD-9	362.51	03/26/2014 Current	03/26/2014
NEEDS OUISIDE CONSOLI FOR POOR VISION AFIER CATARCT SURGERT OF THE LEFT EYE	דט אָדו			
Primary open angle glaucoma				
05/12/2016 16:12 EST Howard, Charles MD REST WE CAN DOI!! Incorrect diagnosis CHRONIC	III ICD-9	365.11	05/20/2015 Resolved	05/12/2016
09/09/2015 11:08 EST Weyand, James OD	III ICD-9	365.11	05/20/2015 Current	05/20/2015
DEST WE CAN DO!!! 05/20/2015 13:19 EST Weyand, James OD	III ICD-9	365.11	05/20/2015 Current	05/20/2015
Nuclear cataract				
06/09/2016 14:50 EST Howard, Charles MD	III ICD-9	366.04	10/12/2012 Resolved	06/09/2016
Lens implants OU 10/12/2012 09:48 EST Auxier, Donald OD	III ICD-9	366.04	10/12/2012 Current	10/12/2012
reccomend consult for extraction of cataracts ou				
Keratitis of Keratoconjunctivitis in exantnema	0-001	370.44	10/05/2011 Pecolyed	05/12/2016
10/05/2011 10:16 EST Radaneata, Christian OD		370.44		10/05/2011
Conjunctivitis, unspecified				

Page 6 of 14

Bureau of Prisons - DEV

Reg #: 07540-085 Inmate Name: ORENA, VICTOR				
Description	Axis Code Type	Code	Diag. Date Status	Status Date
02/23/2016 07:20 EST SYSTEM	III ICD-9	372.30	10/14/2011 Resolved	03/08/2013
03/08/2013 10:14 EST Tabor, Timothy PA-C	III ICD-9	372.30	10/14/2011 Resolved	03/08/2013
10/14/2011 14:04 EST Paul-Blanc, Yves MLP	III ICD-9	372.30	10/14/2011 Current	10/14/2011
Impacted cerumen				
10/25/2016 13:01 EST Hardy, William MD	III ICD-9	380.4	03/12/2014 Resolved	10/25/2016
03/12/2014 10:02 EST Gosa, S. PA-C	III ICD-9	380.4	03/12/2014 Current	03/12/2014
Acute serous otitis media				
02/23/2016 07:20 EST SYSTEM	III ICD-9	381.01	04/10/2014 Resolved	12/10/2015
12/10/2015 13:36 EST Cure, Julie PA-C	III ICD-9	381.01	04/10/2014 Resolved	12/10/2015
04/10/2014 09:08 EST Gosa, S. PA-C	III ICD-9	381.01	04/10/2014 Current	04/10/2014
Acute mucoid otitis media				
02/23/2016 07:20 EST SYSTEM	III ICD-9	381.02	06/24/2009 Resolved	06/24/2009
08/09/2009 13:25 EST Ramos, Migdalia MLP	III ICD-9	381.02	06/24/2009 Resolved	06/24/2009
06/24/2009 10:12 EST Cacho, Jaime MLP	III ICD-9	381.02	06/24/2009 Current	06/24/2009
External hemorrhoids without mention of comp				
02/23/2016 07:20 EST SYSTEM	6-COI III	455.3	11/18/2010 Resolved	06/22/2011
06/22/2011 12:24 EST Wilson, William E. MD/CD	III ICD-9	455.3	11/18/2010 Resolved	06/22/2011
11/18/2010 11:52 EST Klink, Kimberly MS, FNP	III ICD-9	455.3	11/18/2010 Current	11/18/2010
Acute laryngopharyngitis				
04/28/2016 14:23 EST Hojnoski, Jon MD	III ICD-9	465.0	05/09/2013 Resolved	04/28/2016
05/09/2013 11:34 EST Tabor, Timothy PA-C	III ICD-6	465.0	05/09/2013 Current	05/09/2013
Bronchitis, acute				
02/23/2016 07:20 EST SYSTEM	III ICD-9	466.0	01/09/2013 Resolved	03/08/2013
03/08/2013 10:14 EST Tabor, Timothy PA-C		466.0		03/08/2013
01/09/2013 10:19 EST Bailey, T. MD	III ICD-6	466.0	01/09/2013 Current	01/09/2013
Acute gastritis				
02/23/2016 07:20 EST SYSTEM	III ICD-9	535.0	06/14/2012 Resolved	03/08/2013
03/08/2013 10:14 EST Tabor, Timothy PA-C	III ICD-9	535.0	06/14/2012 Resolved	03/08/2013
06/14/2012 11:19 EST Blila, Christopher FNP-C	III ICD-9	535.0	06/14/2012 Current	06/14/2012
Chronic kidney disease, Stage II (mild)				
02/23/2016 07:20 EST SYSTEM	III ICD-9	585.2	01/07/2014 Resolved	01/07/2015
01/07/2015 10:57 EST Santos, Elizabete D.O., Clinical	6-QDI III	585.2	01/07/2014 Resolved	01/07/2015
01/07/2014 12:19 EST Santos, Elizabete D.O., Clinical	III ICD-9	585.2	01/07/2014 Current	01/07/2014
Director				

Page 7 of 14

Bureau of Prisons - DEV

Reg #: 07540-085 Inmate Name: ORENA, VICTOR				
Description	Axis Code Type	Code	Diag. Date Status	Status Date
Onychia and paronychia of toe				
02/23/2016 07:20 EST SYSTEM	III ICD-9	681.11	04/19/2011 Resolved	09/19/2011
09/19/2011 13:27 EST Wilson, William E. MD/CD	III ICD-9	681.11	04/19/2011 Resolved	09/19/2011
04/19/2011 10:39 EST Tabor, Timothy PA-C	III ICD-9	681.11	04/19/2011 Current	04/19/2011
Other seborrheic dermatitis				
02/23/2016 07:20 EST SYSTEM	III ICD-9	690.18	08/22/2008 Resolved	08/22/2008
08/26/2009 11:36 EST McCollum, William MD, CD	III ICD-9	690.18	08/22/2008 Resolved	08/22/2008
08/22/2008 11:32 EST Cintron, Miguel A MD	III ICD-9	690.18	08/22/2008 Current	08/22/2008
Dermatitis due to other specified cause				
02/23/2016 07:20 EST SYSTEM	III ICD-9	692.89	01/26/2009 Resolved	01/26/2009
08/26/2009 11:36 EST McCollum, William MD, CD	III ICD-9	692.89	01/26/2009 Resolved	01/26/2009
01/26/2009 11:31 EST Cintron, Miguel A MD	III ICD-9	692.89	01/26/2009 Current	01/26/2009
Dermatitis/eczema due to unspecified cause				
10/25/2016 13:01 EST Hardy, William MD	III ICD-9	692.9	07/15/2011 Resolved	10/25/2016
10/16/2013 07:53 EST Powanda, Micki PA-C	III ICD-9	692.9	07/15/2011 Current	10/16/2013
03/08/2013 10:14 EST Tabor, Timothy PA-C	III ICD-9	692.9	07/15/2011 Resolved	03/08/2013
07/15/2011 14:33 EST Tabor, Timothy PA-C	III ICD-9	692.9	07/15/2011 Current	07/15/2011
Psoriasis NOS				
11/16/2021 14:31 EST Ruze, P. (MAT) MD	III ICD-9	696.1	11/30/2012 Resolved	11/16/2021
11/30/2012 14:37 EST Tabor, Timothy PA-C	III ICD-9	696.1	11/30/2012 Current	11/30/2012
Ingrowing nail				
02/23/2016 07:20 EST SYSTEM	III ICD-9	703.0	10/10/2013 Resolved	11/05/2013
11/05/2013 10:22 EST Powanda, Micki PA-C	III ICD-9	703.0	10/10/2013 Resolved	11/05/2013
10/10/2013 08:13 EST Powanda, Micki PA-C	III ICD-9	703.0	10/10/2013 Current	10/10/2013
Other specified diseases of nail				
02/23/2016 07:20 EST SYSTEM	III ICD-9	703.8	10/15/2015 Resolved	12/10/2015
Mal-forming, thickening, and curving of the (R) great toe nail, and other nails				
12/10/2015 13:36 EST Cure, Julie PA-C	III ICD-9	703.8	10/15/2015 Resolved	12/10/2015
Mal-forming, thickening, and curving of the (R) great toe nail, and other nails				
bliaterally. 10/15/2015 14:34 EST Gosa, S. PA-C	III ICD-9	703.8	10/15/2015 Current	10/15/2015
Mal-forming, thickening, and curving of the (R) great toe nail, and other nails				
Knee. Pain in ioint, lower lea				
07/23/2019 09:34 EST Murray, Scott MD	III ICD-9	719.46	09/18/2013 Resolved	07/23/2019

Page 8 of 14

Bureau of Prisons - DEV

Reg #: 07540-085 Inmate Name: ORENA, VICTOR					
Description 09/18/2013 14:18 EST Powanda, Micki PA-C	Axis =	Code Type ICD-9	<b>Code</b> 719.46	Diag. Date Status 09/18/2013 Current	<b>Status Date</b> 09/18/2013
Syncope and collapse 02/23/2016 07:20 EST SYSTEM	=	ICD-9	780.2	02/27/2009 Resolved	05/09/2013
Patient with recurrent near syncope episodes. 05/09/2013 11:34 EST Tabor, Timothy PA-C	=	lCD-9	780.2	02/27/2009 Remission	05/09/2013
Patient with recurrent near syncope episodes. 02/27/2009 12:18 EST Negron, Ivan L MD Patient with recurrent near syncope episodes.	≡	ICD-9	780.2	02/27/2009 Current	02/27/2009
Shortness of breath					
02/23/2016 07:20 EST SYSTEM DOF without notable findings	<b>=</b>	ICD-9	786.05	03/19/2015 Resolved	12/10/2015
12/10/2015 13:36 EST Cure, Julie PA-C	=	ICD-9	786.05	03/19/2015 Resolved	12/10/2015
DOE, without notable findings. 03/19/2015 08:24 EST Gosa, S. PA-C	=	ICD-9	786.05	03/19/2015 Current	03/19/2015
LTBI No Prophy Indicated					
06/14/2024 11:55 EST Smithart, Peggy QIIC RN	≡	ICD-10	795.5C	02/07/1994 Resolved	06/14/2024
LEAVE AS CURKENT Childhood history of +PPD. Retested in Feb 1994=20mm. 03/20/2017 10:29 EST. Shnaper, Darlene RN/QA/ID	≡	ICD-10	795.5C	02/07/1994 Current	03/20/2017
Coord LEAVE AS CURRENT Childhood history of +PPD. Retested in Feb 1994=20mm. 10/20/2009 15:21 EST Macyszyn, Mark RN/IDC/IOP Childhood history of +PPD. Retested in Feb 1994=20mm.	=	ICD-9	795.5C	02/07/1994 Resolved	08/20/2009
Hand, sprain and strain					
02/23/2016 07:20 EST SYSTEM	=	ICD-9	842.10	05/12/2015 Resolved	12/10/2015
May be arthritic in nature, will get x-rays for this. 12/10/2015 13:36 EST Cure, Julie PA-C	=	ICD-9	842.10	05/12/2015 Resolved	12/10/2015
May be arthritic in nature, will get x-rays for this. 05/12/2015 10:44 EST Gosa, S. PA-C May be arthritic in nature, will get x-rays for this.	=	ICD-9	842.10	05/12/2015 Current	05/12/2015
Deferred					
07/23/2019 09:34 EST Murray, Scott MD 11/02/2012 12:47 EST Bailey, T. MD	= =	ICD-9 ICD-9	Axis II: Axis II:	11/02/2012 Resolved 11/02/2012 Current	07/23/2019 11/02/2012
Obesity 07/23/2019 09:34 EST Murray, Scott MD		ICD-10	E669	09/23/2016 Resolved	07/23/2019
BMI 32.8 09/23/2016 12:04 EST Lund, L. D.O.		ICD-10	E669	09/23/2016 Current	
Generated 03/11/2025 09:20 by Magnusson, Cheryl Legal Asst	ıs - DEV				Page 9 of 14

Reg #: 07540-085 Inmate Name: ORENA, VICTOR				
Description A:	Axis Code Type	Code	Diag. Date Status	Status Date
Impacted cerumen 04/10/2018 13:31 EST Hardy, William MD 01/17/2018 13:55 EST Coffey, C. PA-C	ICD-10 ICD-10	H6120 H6120	01/17/2018 Resolved 01/17/2018 Current	04/10/2018
Impacted cerumen 04/10/2018 13:31 EST Hardy, William MD 05/22/2017 10:07 EST Fandreyer, F. FNP	ICD-10 ICD-10	H6120 H6120	05/22/2017 Resolved 05/22/2017 Current	04/10/2018
Heart failure, UNS 07/23/2019 09:34 EST Murray, Scott MD 2018: EF=45%, stable from 2011 echo	ICD-10	1509	09/28/2017 Resolved	07/23/2019
09/28/2017 16:53 EST Murray, Scott MD 2011: EF=45%. mild MR/TR, and mild septal/apical HK. cath (2009): no obstructive disease. repeat echo pending. Aneurysm of unspecified site	ICD-10	1509	09/28/2017 Current	
07/23/2019 09:34 EST Murray, Scott MD	ICD-10	1729	07/02/2019 Resolved	07/23/2019
07/02/2019 08:25 EST Jean, W. MD AAA S/p surgical repaired.	ICD-10	1729	07/02/2019 Current	
Acute upper respiratory infection, unspecified 10/23/2017 16:55 EST Hardy, William MD 05/22/2017 10:07 EST Fandreyer, F. FNP	ICD-10 ICD-10	990r	05/22/2017 Resolved 05/22/2017 Current	10/23/2017
Unspecified bacterial pneumonia 03/10/2025 11:02 EST Fandreyer, F. FNP 01/30/2025 14:29 EST Fandreyer, F. FNP	ICD-10 ICD-10	J159 J159	01/30/2025 Resolved 01/30/2025 Current	03/10/2025
Pneumonia, unspecified organism 03/10/2025 11:02 EST Fandreyer, F. FNP 02/24/2025 12:56 EST Riley, E. NP-C	ICD-10 ICD-10	J189 J189	02/24/2025 Resolved 02/24/2025 Current	03/10/2025
Pneumonia, unspecified organism 07/23/2019 09:34 EST Murray, Scott MD most like assoc with M. Pneum. 02/04/2019 13:48 EST Jean, W. MD most like assoc with M. Pneum.	ICD-10	J189 J189	02/04/2019 Resolved 02/04/2019 Current	07/23/2019
Unspecified hemorrhoids 03/10/2025 11:02 EST Fandreyer, F. FNP 09/11/2019 16:15 EST Murray, Scott MD	ICD-10 ICD-10	K649 K649	09/11/2019 Resolved 09/11/2019 Current	03/10/2025
Pressure uicer of buttock Generated 03/11/2025 09:20 by Magnusson, Cheryl Legal Asst	- DEV			Page 10 of 14

Reg #: 07540-085 Inmate Name: ORENA, VICTOR				
	Code Type	Code	Diag. Date Status	Status Date
01/30/2025 14:27 EST Fandreyer, F. FNP	ICD-10	L89309	04/22/2024 Resolved	01/30/2025
04/22/2024 13:25 EST Fandreyer, F. FNP	ICD-10	L89309	04/22/2024 Current	
Olecranon bursitis, unspecified elbow				
01/30/2025 14:27 EST Fandreyer, F. FNP left	ICD-10	M7020	02/08/2024 Resolved	01/30/2025
02/08/2024 13:38 EST Fandreyer, F. FNP	ICD-10	M7020	02/08/2024 Current	
Urinary tract infection, site not specified				
04/10/2018 13:31 EST Hardy, William MD	ICD-10	N390	12/27/2017 Resolved	04/10/2018
12/27/2017 11:36 EST Lund, L. D.O.	ICD-10	N390	12/27/2017 Current	
Significant Procedures				
	III ICD-9	Procedu	05/07/2010 Resolved	
4-27-10 colonoscopy-hemorrhoids, diverticulosis, colonic polyp ( T-V ADENOMA). 07/06/2010 15:19 EST Wilson. William E. MD	1CD-9	Procedu	05/07/2010	
4-27-10 colonoscopy-hemorrhoids, diverticulosis, colonic polyp ( T-V ADENOMA).				
05/07/2010 13:36 EST Wilson, William E. MD 4-27-10 colonoscopy-hemorrhoids, diverticulosis, colonic polyp.	l ICD-9	Procedu	05/07/2010	
Acute cough				
03/10/2025 11:02 EST Fandreyer, F. FNP	ICD-10	R051	01/13/2025 Resolved	03/10/2025
01/13/2025 15:36 EST Goudreau, S. PA-C	ICD-10	R051	01/13/2025 Current	
Chest pain, unspecified				
07/23/2019 09:34 EST Murray, Scott MD	ICD-10	R079	04/16/2018 Resolved	07/23/2019
R chest pain s/p fall	:	1		
04/16/2018 12:55 EST Kilduff, Diane NP R chest pain s/p fall	ICD-10	R079	04/16/2018 Current	
Unspecified abdominal pain				
07/23/2019 09:34 EST Murray, Scott MD	ICD-10	R109	05/21/2018 Resolved	07/23/2019
05/21/2018 10:40 EST Coffey, C. PA-C	ICD-10	R109	05/21/2018 Current	
Unsp symptoms and signs involving the genitourinary system				
03/10/2025 11:02 EST Fandreyer, F. FNP	ICD-10	R399	04/02/2024 Resolved	03/10/2025
phimosis				
04/02/2024 09:52 EST Fandreyer, F. FNP phimosis	ICD-10	R399	04/02/2024 Current	
Headache				
07/23/2019 09:34 EST Murray, Scott MD 04/09/2019 14:40 EST Jean, W. MD	ICD-10 ICD-10	R51 R51	04/09/2019 Resolved 04/09/2019 Current	07/23/2019
Generated 03/11/2025 09:20 by Magnusson, Cheryl Legal Asst	)EV			Page 11 of 14

Reg #: 07540-085 Inmate Name: ORENA, VICTOR				
<u>Description</u>	Axis Code Type	Code	Diag. Date Status	Status Date
Edema, unspecified 11/16/2021 14:31 EST Ruze, P. (MAT) MD	ICD-10	R609	07/30/2020 Resolved	11/16/2021
new onset over may -july with weight gain. ? etiology 07/30/2020 10:00 EST Murray, Scott MD new onset over may -july with weight gain. ? etiology	ICD-10	R609	07/30/2020 Current	
Superficial injury of finger 01/30/2025 14:50 EST Fandreyer, F. FNP 11/08/2022 10:38 EST Fandreyer, F. FNP	ICD-10 ICD-10	S60949 S60949	11/08/2022 Resolved 11/08/2022 Current	01/30/2025
Confirmed case COVID-19 11/14/2022 11:25 EST Smithart, Peggy QIIC RN 11/07/2022 10:55 EST Smithart, Peggy QIIC RN	ICD-10 ICD-10	U07.1 U07.1	11/04/2022 Resolved 11/04/2022 Current	11/14/2022
Confirmed case COVID-19 01/08/2021 12:50 EST Khazen, R. MD	ICD-10	U07.1	12/16/2020 Resolved	01/08/2021
Murray, Scott MD cough, nasal congestion), and rapid test pos 12/1	ICD-10	U07.1	12/16/2020 Current	
nistory of colonic polyps 02/23/2016 07:20 EST SYSTEM 7-26.10-tribular adaptoms - will pand f/u colonoscopy within 3- years	III ICD-9	V12.72	05/07/2010 Resolved	05/07/2010
05/07/2010 13:36 EST Wilson, William E. MD 4-26-10-tubular adenoma - will need f/u colonoscopy within 3- years History of noncompliance with medical treatment	6-QOI III	V12.72	05/07/2010 Current	05/07/2010
02/23/2016 07:20 EST SYSTEM	III ICD-9	V15.81	02/17/2009 Resolved	02/17/2009
NOICOIDPIIGITCE WILL GIEL 08/26/2009 11:36 EST McCollum, William MD, CD Noncompliance with diet	6-QOI III	V15.81	02/17/2009 Resolved	02/17/2009
Noncompliance with diet  02/17/2009 13:42 EST Cintron, Miguel A MD  Noncompliance with diet  Other eve problems	6-QOI III	V15.81	02/17/2009 Current	02/17/2009
05/12/2016 16:12 EST Howard, Charles MD STATUS POST SURGERY OF THE SCLERA TO DECREASE INTRA-OCULAR	III ICD-9	V41.1	01/19/2012 Resolved	05/12/2016
PRESSURE: TRABECULECTOMY OU 01/19/2012 13:12 EST Garcia, Anthony MD STATUS POST SURGERY OF THE SCLERA TO DECREASE INTRA-OCULAR PRESSURE. Automatic implantable cardiac defibrillator	III ICD-9	V41.1	01/19/2012 Current	01/19/2012

Page 12 of 14

Bureau of Prisons - DEV

Reg #: 07540-085 Inmate Name: ORENA, VICTOR					
Description	Axis	Code Type	Code	Diag. Date Status	Status Date
01/04/2021 17:30 EST Murray, Scott MD	≡	ICD-9	V45.02	06/29/2012 Resolved	01/04/2021
NOT an AICD. DDD pacemaker (St.Jude/Abbott).is pacemaker dependent 06/29/2012 15:02 EST Tabor, Timothy PA-C	Ξ	ICD-9	V45.02	06/29/2012 Current	06/29/2012
Encounter change/ removal surgical wound dressing					
10/25/2016 13:01 EST Hardy, William MD	=	ICD-9	V58.31	12/24/2013 Resolved	10/25/2016
Dressing changes, no S & S of infection, wound dry and intact.	=	0	1/50 24	40/04/2043 Curront	40/04/0049
Dressing changes, no S & S of infection, wound dry and intact.		9	5.00		01/42/21
Counseling NOS					
02/23/2016 07:20 EST SYSTEM	≡	6-QOI	V65.40	11/05/2013 Resolved	12/10/2015
12/10/2015 13:36 EST Cure, Julie PA-C	Ξ	ICD-9	V65.40	11/05/2013 Resolved	12/10/2015
11/05/2013 10:22 EST Powanda, Micki PA-C	≡	ICD-9	V65.40	11/05/2013 Current	11/05/2013
Unspecified follow-up examination					
02/23/2016 07:20 EST SYSTEM	≡	ICD-9	6.797	02/16/2009 Resolved	02/16/2009
08/09/2009 13:25 EST Ramos, Migdalia MLP	≡	ICD-9	6.797	02/16/2009 Resolved	02/16/2009
02/16/2009 10:44 EST Ramos, Migdalia MLP	Ξ	ICD-9	6.797	02/16/2009 Current	02/16/2009
Condition Not Found, Essentially Healthy					
07/23/2019 09:34 EST Murray, Scott MD	≡	ICD-9	V71.9	11/02/2012 Resolved	07/23/2019
11/02/2012 12:47 EST Bailey, T. MD	Ξ	ICD-9	V71.9	11/02/2012 Current	11/02/2012
Screening for malignant neo of intestine, unspecif					
07/23/2019 09:34 EST Murray, Scott MD	Ξ	ICD-9	V76.50	12/10/2013 Resolved	07/23/2019
1/6/15: Colonoscopy: one polyp removed; path pending.	į	() ()	( ( (		
01/07/2015 10:50 EST Santos, Elizabete D.O., Clinical Director	=	lCD-9	V76.50	12/10/2013 Current	12/10/2013
12/10/2013 09:01 EST Santos, Elizabete D.O., Clinical Director		6-GD-8	076.50	12/10/2013 Current	12/10/2013
Blunt object, Assault by					
01/30/2025 14:50 EST Fandreyer, F. FNP		ICD-10	Y00XXX	07/06/2023 Resolved	01/30/2025
07/06/2023 14:37 EST Churchville, Lawrence MD		ICD-10	Y00XXX	07/06/2023 Current	
Falling, jumping or pushed from a high place, undetermined intent					
04/10/2018 13:31 EST Hardy, William MD		ICD-10	Y30XXX	02/19/2018 Resolved	04/10/2018
02/19/2018 08:41 EST Riley, E. NP-C		ICD-10	Y30XXX	02/19/2018 Current	
Other ambulatory health services establishments as place of injury/occurrence					
01/30/2025 14:50 EST Fandreyer, F. FNP		ICD-10	Y92538	02/11/2021 Resolved	01/30/2025
02/11/2021 14:16 EST Murray, Scott MD		ICD-10	Y92538	02/11/2021 Current	
Generated 03/11/2025 09:20 by Magnusson, Cheryl Legal Asst	sons - DE	>			Page 13 of 14

Reg #: 07540-085 Inmate Name: ORENA, VICTOR				
Description	Axis Code Type	Code	Diag. Date Status	Status Date
Quarantine - asymptomatic person in quarantine				
11/07/2022 10:55 EST Smithart, Peggy QIIC RN	ICD-10	Z0489-q	10/26/2021 Resolved	11/07/2022
10/26/2021 13:27 EST Khazen, R. (MAT) MD Covid 19.	ICD-10	Z0489-q	10/26/2021 Current	
Current	Ŧ			
Dermatophytosis of nail (Tinea unguium)				
09/23/2016 12:04 EST Lund, L. D.O.	<del>6-021</del> #	<del>110.1</del>	01/21/2015 Current	01/21/2015
duplicate	0 0 =	7	T 100 100 100 100 100 100 100 100 100 10	0 0 1 1
01/21/2015 14:26 EST Gosa, S. PA-C	8-CO III	1.10.1	01/21/2015 Current	G1/Z1/Z/10
Chronic angle-closure glaucoma				
04/04/2013 13:02 EST Bailey, Roger MD DUPLICATE	<del>6-021</del> #	365.23	07/06/2012 Current	07/06/2012
07/06/2012 13:50 EST Auxier, Donald OD	III ICD-9	365.23	07/06/2012 Current	07/06/2012
Retained dental root				
04/04/2013 13:02 EST Bailey, Roger MD	<del>6-Q)</del> #	525.3	44/22/2010 Current	41/22/2010
DUPLICATE 11/22/2010 09:24 EST Shepherd Dotto DMD	6-UCI III	5253	11/22/2010 Current	11/22/2010
Benign localized hyperplasia of prostate NOS	•			
96/22/2011 12:24 EST Wilson, William E. MD/CD	<del>6-03 </del> #	600.20	08/22/2008 Current	08/22/2008
×				
08/22/2008 11:31 EST Cintron, Miguel A MD	III ICD-9	600.20	08/22/2008 Current	08/22/2008

**Total:** 114

### **Bureau of Prisons Health Services**

#### **Treatments**

			Treatment	S	
Begin Date:	03/01/2025		End Date:	03/11/2025	
Reg #:	07540-085		Inmate Name:	ORENA, VICTOR	
<u>Date</u>	<u>Time</u>	<u>Treatment</u>	Prov	<u>vider</u>	<u>Status</u>
03/11/2025				el, V. RN	Completed
				·	' '
					denies itching/burning, does not unchanged but will assess in
person t		to medications/external i	actors. Consuite	a with MEL , Scenis	dicianged but will assess in
•	-	1/2025 08:56 EST Kisiel	I V RN		
_		Safety Precautions: Fal		lurken, Mark RN	Completed
		•	I IVICC	iuikeii, iviaik ixiv	Completed
	Interventions N/A	s: Inmate oriented to MDU ៖	curroundings		
Y_x N Y N		Is Inmate on medications	_	lertness	
Y_x'N		Encourage Independence		101111000	
Y x N		Reorientation as needed;		vided as needed	
Y_x N	I N/A	Bed in low position with w	vheels locked, B		
Y_x N		Personal items within rea			
Y_x N		Nonslip, well-fitting footw			
Y_x N		Floor surfaces are clean,		clutter	
Y_x N		In close proximity to the N		<b>*</b> 0	
Y_x N Y_x N		Bathroom assistance offe Assistive ambulatory dev			
Y_x_N		Frequent safety checks	ice. Il yes, what	device(s). Walker	
Y_x N		Assess comfort level to p	romote mobility		
Y_x N		Encourage brief periods of		b	
Y_x N		Avoid excessive stimuli			
Any othe	er comments,	concerns:			
Orig Eı	ntered: 03/11	1/2025 06:42 EST Mcclu	urken, Mark RN		
03/10/2025	23:09 DEV	Safety Precautions: Fal	I Hatz	zidakis, Kristie RN	Completed
Fall Risk	Interventions	s:			
Y_x N	I N/A	Inmate oriented to MDU s	surroundings		
Y N_	_x N/A	ls Inmate on medications		lertness	
Y_x N		Encourage Independence			
Y_x N		Reorientation as needed;			
Y_x N Y_x N		Bed in low position with v Personal items within rea		ed rails x 2	
Y x N		Nonslip, well-fitting footw			
Y_xN		Floor surfaces are clean,		clutter	
Y_x N		In close proximity to the N			
Y_x N		Bathroom assistance offe		rs	
Y_x N	I N/A /	Assistive ambulatory dev	ice. If yes, what	device(s): walker	
Yx_ N		Frequent safety checks			
Y_x N		Assess comfort level to p			
Y_x N		Encourage brief periods of	of rest as needed	d	
Y_x N		Avoid excessive stimuli			
-	er comments,		dakia Kwiatia DN	1	
_		0/2025 23:09 EST Hatzi			O constated
03/10/2025		Safety Precautions: Fal	i Cna	rles-Washington,	Completed
	Interventions				
Y_x N		Inmate oriented to MDU s Is Inmate on medications		lortnoss	
Y N_ Y_x_ N		is inmate on medications Encourage Independence		ICI II IC33	
Y x N		Reorientation as needed;		vided as needed	
Y_xN		Bed in low position with w			
Y_x N		Personal items within rea		·	
V V N		Nonclin wall fitting footw	oor in uso		

Begin Date: 03/01/2025 End Date: 03/11/2025 Reg #: 07540-085 Inmate Name: ORENA, VICTOR Date **Treatment** Provider Time **Status**  $Y \times N$ N/A Floor surfaces are clean, dry and free of clutter  $Y \times N$ N/A In close proximity to the Nurses station Y\_x\_\_ N N/A Bathroom assistance offered every 2 hours N/A\_\_\_ Y\_x\_\_ N Assistive ambulatory device. If yes, what device(s): walker Y\_\_x\_ N N/A Frequent safety checks Assess comfort level to promote mobility  $Y \times N$ N/A N/A Encourage brief periods of rest as needed  $Y \times N$ N/A Avoid excessive stimuli  $Y \times N$ Any other comments, concerns: Orig Entered: 03/10/2025 10:01 EST Charles-Washington, M. RN 03/10/2025 09:57 DEV Bath/Shower Charles-Washington, Completed took shower. Orig Entered: 03/10/2025 09:57 EST Charles-Washington, M. RN 03/10/2025 05:36 DEV Safety Precautions: Fall Mcclurken, Mark RN Completed Fall Risk Interventions: N/A Inmate oriented to MDU surroundings  $Y \times N$ Is Inmate on medications that decrease alertness Y\_\_\_ N\_x\_\_ N/A\_\_\_ N/A Encourage Independence  $Y \times N$ Reorientation as needed; Verbal cues provided as needed  $Y \times N$ N/A  $Y_x_N$ Bed in low position with wheels locked, Bed rails x 2 N/A Y\_x\_\_ N\_ N/A Personal items within reach Y\_x\_\_ N\_ Nonslip, well-fitting footwear in use N/A N/A Y\_x\_\_ N Floor surfaces are clean, dry and free of clutter  $Y \times N$ N/A In close proximity to the Nurses station  $Y \times N$ N/A Bathroom assistance offered every 2 hours  $Y_x_N$ N/A Assistive ambulatory device. If yes, what device(s): walker Y\_\_x\_ N\_ N/A Frequent safety checks N/A \_\_\_ Y\_x\_\_ N\_ Assess comfort level to promote mobility Y\_x\_\_ N N/A Encourage brief periods of rest as needed Avoid excessive stimuli  $Y \times N$ N/A Any other comments, concerns: Orig Entered: 03/10/2025 05:36 EST Mcclurken, Mark RN 03/09/2025 08:33 DEV Safety Precautions: Fall Babineau, William RN Completed Fall Risk Interventions: Inmate oriented to MDU surroundings Y x N N/A N\_\_x\_ N/A Is Inmate on medications that decrease alertness  $Y \times N$ N/A Encourage Independence  $Y \times N$ N/A Reorientation as needed; Verbal cues provided as needed Bed in low position with wheels locked, Bed rails x 2 Y\_x\_\_ N\_ N/A N/A\_\_\_ Y\_x\_\_ N\_ Personal items within reach Nonslip, well-fitting footwear in use Y\_x\_\_ N\_ N/A Floor surfaces are clean, dry and free of clutter Y\_x N N/A  $Y \times N$ N/A In close proximity to the Nurses station Ν N/A Bathroom assistance offered every 2 hours Υx Assistive ambulatory device. If ves. what device(s): N\_\_x\_ N/A\_ Y\_x\_\_ N\_ N/A Frequent safety checks Y\_x\_\_ N Asses comfort level to promote mobility N/A Y\_\_x\_ N\_ N/A Encourage brief periods of rest as needed  $Y \times N$ N/A Avoid excessive stimuli Any other comments, concerns: Orig Entered: 03/09/2025 08:33 EST Babineau, William RN 03/09/2025 08:33 DEV Safety Precautions: Fall Babineau, William RN Completed

Generated 03/11/2025 09:20 by Magnusson, Cheryl Legal

Y x N N/A Inmate oriented to MDU surroundings

N/A Encourage Independence

N\_x\_N/A\_\_ Is Inmate on medications that decrease alertness

Fall Risk Interventions:

Y\_x\_\_ N\_\_

Bureau of Prisons - DEV

Begin Date: 03/01/2025 End Date: 03/11/2025 Reg #: Inmate Name: ORENA, VICTOR 07540-085 **Date Treatment** Provider Time **Status**  $Y \times N$ N/A Reorientation as needed; Verbal cues provided as needed  $Y \times N$ N/A Bed in low position with wheels locked, Bed rails x 2 \_ N N/A Personal items within reach Y\_x\_\_ N\_ N/A Nonslip, well-fitting footwear in use Y\_x\_\_ N N/A Floor surfaces are clean, dry and free of clutter Y\_x\_ N N/A In close proximity to the Nurses station N/A Bathroom assistance offered every 2 hours Ν N\_\_x\_ N/A\_ Assistive ambulatory device. If yes, what device(s): N/A Y\_x\_\_ N\_ Frequent safety checks N/A \_\_\_ Y\_x\_\_ N Asses comfort level to promote mobility N/A Encourage brief periods of rest as needed  $Y \times N$ Avoid excessive stimuli  $Y \times N$ N/A Any other comments, concerns: Orig Entered: 03/09/2025 08:33 EST Babineau, William RN 03/09/2025 06:51 DEV Safety Precautions: Fall Mcclurken, Mark RN Completed Fall Risk Interventions: Inmate oriented to MDU surroundings Y\_x\_\_ N N/A Is Inmate on medications that decrease alertness  $N \times N/A$  $Y \times N$ N/A **Encourage Independence** Y\_x\_\_ N N/A Reorientation as needed; Verbal cues provided as needed Y\_x\_\_ N\_ N/A Bed in low position with wheels locked, Bed rails x 2 Y\_x\_\_ N\_ N/A Personal items within reach N/A Y\_x\_\_ N Nonslip, well-fitting footwear in use  $Y \times N$ N/A Floor surfaces are clean, dry and free of clutter  $Y \times N$ N/A In close proximity to the Nurses station Y\_x\_\_ N\_ N/A Bathroom assistance offered every 2 hours Assistive ambulatory device. If yes, what device(s): walker  $Y \times N$ N/A N/A\_\_\_\_ Frequent safety checks Y\_\_x\_ N\_ Assess comfort level to promote mobility Y\_x\_\_ N N/A Encourage brief periods of rest as needed  $Y \times N$ N/A N/A Avoid excessive stimuli Υx N Any other comments, concerns: Orig Entered: 03/09/2025 06:51 EST Mcclurken, Mark RN 03/08/2025 08:20 DEV Safety Precautions: Fall Babineau, William RN Completed Fall Risk Interventions: Inmate oriented to MDU surroundings  $Y \times N$ N/A  $N \times N/A$ Is Inmate on medications that decrease alertness Y\_x\_\_ N\_ N/A Encourage Independence Y\_x\_\_ N\_ N/A Reorientation as needed; Verbal cues provided as needed N/A Y\_x\_\_ N\_ Bed in low position with wheels locked, Bed rails x 2 Personal items within reach Y\_x\_\_ N\_ N/A Y\_x N N/A Nonslip, well-fitting footwear in use N/A Floor surfaces are clean, dry and free of clutter  $Y \times N$ Y\_x\_ N N/A In close proximity to the Nurses station Y\_x\_\_ N\_ N/A Bathroom assistance offered every 2 hours N\_\_x\_ N/A\_ Assistive ambulatory device. If yes, what device(s): Y\_x\_\_ N\_ N/A Frequent safety checks Y\_x N Asses comfort level to promote mobility N/A Encourage brief periods of rest as needed  $Y \times N$ N/A N/A Avoid excessive stimuli  $Y \times N$ Any other comments, concerns: Orig Entered: 03/08/2025 08:20 EST Babineau, William RN

03/08/2025 08:20 DEV Safety Precautions: Fall Babineau, William RN Completed

Fall Risk Interventions:

Y\_x\_\_ N\_\_\_ N/A\_\_\_ Inmate oriented to MDU surroundings

N x N/A Is Inmate on medications that decrease alertness

Y\_x\_ N\_\_ N/A\_\_ Encourage Independence

Reg #: 07540-085 Inmate Name: ORENA, VICTOR

	07340-003	Illinate Name. ONLINA, VICTOR	
<u>Date</u>	<u>Time</u>	<u>Treatment</u> <u>Provider</u>	<u>Status</u>
Y_x I	N N/A	Reorientation as needed; Verbal cues provided as needed	
	N N/A	Bed in low position with wheels locked, Bed rails x 2	
	N N/A	Personal items within reach	
	N N/A	Nonslip, well-fitting footwear in use	
	N N/A	Floor surfaces are clean, dry and free of clutter	
	N N/A	In close proximity to the Nurses station	
Y_x I Y N	N N/A 	Bathroom assistance offered every 2 hours Assistive ambulatory device. If yes, what device(s):	
Y x 1		-	
Y_xi		Asses comfort level to promote mobility	
Yx_ i		Encourage brief periods of rest as needed	
Y x i		Avoid excessive stimuli	
Any oth	er comments		
Oria E	ntered: 03/0	08/2025 08:20 EST Babineau, William RN	
_		/ Safety Precautions: Fall Duncan, L. RN	Completed
		•	Completed
	k Intervention		
Y_x I Y N		Inmate oriented to MDU surroundings Is Inmate on medications that decrease alertness	
Y_x'		Encourage Independence	
Y_xi			
Y_x i		Bed in low position with wheels locked, Bed rails x 2	
	N N/A	Personal items within reach	
Y_x I	N N/A	Nonslip, well-fitting footwear in use	
Y_x I	N N/A	Floor surfaces are clean, dry and free of clutter	
	N N/A	In close proximity to the Nurses station	
Y_x I			_
Y_x !		Assistive ambulatory device. If yes, what device(s): wheelch	air
Y_x_I		- •	
Y_x I		Asses comfort level to promote mobility	
Y_x I Y x     I		Encourage brief periods of rest as needed  Avoid excessive stimuli	
	ner comments	-	
-		08/2025 05:29 EST Duncan, L. RN	
_			Completed
		/ Safety Precautions: Fall Procaccini, Sherri RN	Completed
	k Intervention		
Y_x I		Inmate oriented to MDU surroundings	
	l_x N/A N N/A	Is Inmate on medications that decrease alertness	
	N N/A N N/A	Encourage Independence Reorientation as needed; Verbal cues provided as needed	
	N N/A	Bed in low position with wheels locked, Bed rails x 2	
	N N/A	Personal items within reach	
	N N/A	Nonslip, well-fitting footwear in use	
	NN/A	Floor surfaces are clean, dry and free of clutter	
	N N/A	In close proximity to the Nurses station	
Y_x I	N N/A	Bathroom assistance offered every 2 hours	
	N N/A	Assistive ambulatory device. If yes, what device(s): wheelch	air
Yx_!		Frequent safety checks	
Y_x I		Asses comfort level to promote mobility	
Y_x I		Encourage brief periods of rest as needed  Avoid excessive stimuli	
	N N/A ner comments		
-			
•		07/2025 16:57 EST Procaccini, Sherri RN	
03/07/2025	10:57 DE\	/ Nail Care Procaccini, Sherri RN	Completed
nails cu	ıt		
		77/000E 40 ET EOT D	

Orig Entered: 03/07/2025 10:57 EST Procaccini, Sherri RN

03/07/2025 08:25 DEV Safety Precautions: Fall Procaccini, Sherri RN Completed

Bureau of Prisons - DEV

 Begin Date:
 03/01/2025
 End Date:
 03/11/2025

 Reg #:
 07540-085
 Inmate Name:
 ORENA, VICTOR

<del></del>	07340-083		Name. ORENA, VICTOR	<b>\</b>
<u>Date</u>	<u>Time</u>	<u>Treatment</u>	<u>Provider</u>	<u>Status</u>
	isk Interventior			
Y_x		Inmate oriented to MDU surroundir	•	
YI		Is Inmate on medications that decre	ease alertness	
Y_x		Encourage Independence	use provided as peeded	
Y_x Y x		Reorientation as needed; Verbal cu Bed in low position with wheels loc		
'_^_ Y x		Personal items within reach	keu, beu falls x 2	
Y x		Nonslip, well-fitting footwear in use		
Υx		Floor surfaces are clean, dry and fr		
Y_x		In close proximity to the Nurses sta		
Y_x		Bathroom assistance offered every		
Y_x		Assistive ambulatory device. If yes	s, what device(s): wheelch	nair
Yx_		Frequent safety checks	1. 99	
Y_x				
Y_x Y_x		Encourage brief periods of rest as a Avoid excessive stimuli	needed	
	NNA ther comments			
•		07/2025 08:25 EST Procaccini, She	orri DN	
_		/ Bath/Shower	Procaccini, Sherri RN	Completed
				Completed
_		07/2025 08:05 EST Procaccini, She		O a manufactor d
03/07/202		/ Safety Precautions: Fall	Duncan, L. RN	Completed
	isk Interventior			
Y_x		Inmate oriented to MDU surrounding Is Inmate on medications that decre		
Y x	Nx_ N/A N N/A	Encourage Independence	ease alei li less	
'_^_ Y x		Reorientation as needed; Verbal cu	ues provided as needed	
Y x		Bed in low position with wheels loc		
Y_x		Personal items within reach	,	
Y_x		Nonslip, well-fitting footwear in use		
Y_x		Floor surfaces are clean, dry and fr		
Y_x		In close proximity to the Nurses sta		
Y_x		Bathroom assistance offered every		
Y1 Y_x	Nx_ N/A N N/A	Assistive ambulatory device. If yes Frequent safety checks	s, what device(s):	
'_x Y_x		Asses comfort level to promote mo	hility	
Ϋ́χ		Encourage brief periods of rest as i		
Y x		Avoid excessive stimuli	1100000	
	her comments			
Orig	Entered: 03/0	07/2025 06:46 EST Duncan, L. RN		
03/06/202	5 16:02 DE\	/ Safety Precautions: Fall	Babineau, William RN	Completed
Fall Ri	isk Intervention	-		·
Υx		Inmate oriented to MDU surroundir	ngs	
	Nx_ N/A	Is Inmate on medications that decre	•	
Y_x		Encourage Independence		
Y_x		Reorientation as needed; Verbal cu	•	
Y_x		Bed in low position with wheels loc	ked, Bed rails x 2	
Y_x		Personal items within reach		
Y_x		Nonslip, well-fitting footwear in use		
Y_x Y_x		Floor surfaces are clean, dry and fr In close proximity to the Nurses sta		
'_^_ Y_x		Bathroom assistance offered every		
	Nx_ N/A	Assistive ambulatory device. If yes		
Y_x_		Frequent safety checks	, -\-/-	
Y_x		Asses comfort level to promote mo	bility	
Yx_		Encourage brief periods of rest as	needed	
Y_x		Avoid excessive stimuli		
Any ot	ther comments	s, concerns:		

Begin Date: 03/01/2025 End Date: 03/11/2025 Inmate Name: ORENA, VICTOR Reg #: 07540-085

	07340-003	Illinate Name. ONLIVA, VICTOR	
<u>Date</u>	<u>Time</u>	<u>Treatment</u> <u>Provider</u>	<u>Status</u>
	isk Interventior	ns:	
	_ N N/A	Inmate oriented to MDU surroundings	
	Nx_ N/A	Is Inmate on medications that decrease alertness	
Y_x		Encourage Independence	
Y_x		Reorientation as needed; Verbal cues provided as needed	
Y_x		Bed in low position with wheels locked, Bed rails x 2	
Y_x		Personal items within reach	
Y_x		Nonslip, well-fitting footwear in use	
Y_x		·	
Y_x			
	_ N N/A		
	Nx_ N/A _ N N/A		
'_X			
	_ IN IN/A _ N N/A	Asses comfort level to promote mobility  Encourage brief periods of rest as needed	
		Avoid excessive stimuli	
	ther comments		
-		06/2025 16:02 EST Babineau, William RN	
_			Carran lata d
03/06/202		/ Safety Precautions: Fall Fadahunsi, Bolanle RN	Completed
	isk Intervention		
Y_X	_ N N/A		
	N_x N/A	Is Inmate on medications that decrease alertness	
Y_x		Encourage Independence	
Y_x		Reorientation as needed; Verbal cues provided as needed	
Y_x Y_x		Bed in low position with wheels locked, Bed rails x 2 Personal items within reach	
'_x Υ x		Nonslip, well-fitting footwear in use	
'_^_ Y_x_			
'_^_ Y x		·	
'_^_ Y x		Bathroom assistance offered every 2 hours	
Y_x_		Assistive ambulatory device. If yes, what device(s): walker	
Yx_			
Y_x_		Assess comfort level to promote mobility	
Y_x_		Encourage brief periods of rest as needed	
Y_x_		Avoid excessive stimuli	
	ther comments	s, concerns:	
		06/2025 09:51 EST Fadahunsi, Bolanle RN	
03/06/202	5 05:37 DEV	/ Safety Precautions: Fall Mcclurken, Mark RN	Completed
	isk Intervention	•	
Y_x		Inmate oriented to MDU surroundings	
	N x N/A	Is Inmate on medications that decrease alertness	
Ϋ́ x	N N/A	Encourage Independence	
Y x	N N/A	Reorientation as needed; Verbal cues provided as needed	
Y x	N N/A	Bed in low position with wheels locked, Bed rails x 2	
Υx		Personal items within reach	
Y_x_		Nonslip, well-fitting footwear in use	
Y_x_		Floor surfaces are clean, dry and free of clutter	
Y_x_	_ N N/A	In close proximity to the Nurses station	
Y_x_	N N/A	Bathroom assistance offered every 2 hours	
Y_x		Assistive ambulatory device. If yes, what device(s): walker	
Yx_		Frequent safety checks	
Y_x		Assess comfort level to promote mobility	
Y_x	_ N N/A	Encourage brief periods of rest as needed	
Y_x	_ N N/A	Avoid excessive stimuli	
-	ther comments		
Orig	Entered: 03/0	06/2025 05:37 EST Mcclurken, Mark RN	

03/05/2025 17:14 DEV Safety Precautions: Fall Montanez-Gonzalez, Completed Begin Date: 03/01/2025 End Date: 03/11/2025 Reg #: 07540-085 Inmate Name: ORENA, VICTOR Date **Treatment Provider** Time **Status** Fall Risk Interventions: Inmate oriented to MDU surroundings Ν N/A N/A Is Inmate on medications that decrease alertness Νx  $Y \times N$ Encourage Independence N/A Y\_x\_ N N/A Reorientation as needed: Verbal cues provided as needed N/A Bed in low position with wheels locked. Bed rails x 2 Y\_x\_\_ N\_ Y\_x\_\_ N N/A Personal items within reach Y\_x\_\_ N\_ N/A Nonslip, well-fitting footwear in use Y\_x\_\_ N N/A Floor surfaces are clean, dry and free of clutter In close proximity to the Nurses station Y\_x\_\_ N N/A Bathroom assistance offered every 2 hours  $Y \times N$ N/A Assistive ambulatory device. If yes, what device(s): wheelchair  $Y \times N$ N/A Frequent safety checks x N N/A Y\_x\_\_ N N/A\_\_\_ Asses comfort level to promote mobility Y\_x\_\_ N N/A \_\_\_ Encourage brief periods of rest as needed Avoid excessive stimuli  $Y \times N$ N/A Any other comments, concerns: Orig Entered: 03/05/2025 17:14 EST Montanez-Gonzalez, Islem RN 03/05/2025 13:08 DEV Skin Check Montanez-Gonzalez, Completed Small open area 1.5 cm x 2 cm on right elbow. He had a Mepilex on from the OSH with a scant amount of bloody drainage. Wound clean with NS and new Mepilex applied. No s/s of infection. Orig Entered: 03/05/2025 13:22 EST Montanez-Gonzalez, Islem RN 03/05/2025 12:52 DEV Bath/Shower Montanez-Gonzalez, Completed Showered Orig Entered: 03/05/2025 12:52 EST Montanez-Gonzalez, Islem RN 03/05/2025 08:26 DEV Safety Precautions: Fall Montanez-Gonzalez, Completed Fall Risk Interventions: Inmate oriented to MDU surroundings N/A Νx N/A Is Inmate on medications that decrease alertness N/A Encourage Independence Y\_x\_ N Reorientation as needed; Verbal cues provided as needed Y\_x\_\_ N N/A  $Y \times N$ N/A Bed in low position with wheels locked, Bed rails x 2 N/A Personal items within reach Y\_x\_\_ N\_ N/A Nonslip, well-fitting footwear in use Y\_x\_\_ N\_ Y\_x\_\_ N N/A Floor surfaces are clean, dry and free of clutter In close proximity to the Nurses station Y x N N/A Y\_x N Bathroom assistance offered every 2 hours N/A Assistive ambulatory device. If yes, what device(s): wheelchair  $Y \times N$ N/A N/A Y\_\_x\_ N\_ Frequent safety checks N/A \_\_ Asses comfort level to promote mobility Y\_x\_\_ N\_ Y\_x\_ N N/A Encourage brief periods of rest as needed  $Y \times N$ N/A Avoid excessive stimuli Any other comments, concerns: Orig Entered: 03/05/2025 08:26 EST Montanez-Gonzalez, Islem RN 03/05/2025 05:39 DEV Safety Precautions: Fall Mcclurken, Mark RN Completed Fall Risk Interventions: N/A Inmate oriented to MDU surroundings  $Y \times N$ Is Inmate on medications that decrease alertness N/A Νx Y\_x\_ N N/A **Encourage Independence**  $Y \times N$ N/A Reorientation as needed; Verbal cues provided as needed Y\_x\_\_ N\_ Bed in low position with wheels locked, Bed rails x 2 N/A N/A\_\_\_ Y\_x\_\_ N\_ Personal items within reach Y\_x\_\_ N N/A Nonslip, well-fitting footwear in use  $Y \times N$ N/A Floor surfaces are clean, dry and free of clutter Y\_x\_\_ N\_ N/A In close proximity to the Nurses station N/A Bathroom assistance offered every 2 hours Ν

Begin Date: 03/01/2025 End Date: 03/11/2025 Reg #: 07540-085 Inmate Name: ORENA, VICTOR Date Time **Treatment** Provider **Status** Assistive ambulatory device. If yes, what device(s): walker  $Y \times N$ N/A Frequent safety checks  $Y \times N$ N/A Y\_x\_\_ N N/A Assess comfort level to promote mobility N/A\_\_\_ Y\_x\_\_ N Encourage brief periods of rest as needed N/A Avoid excessive stimuli Ν Υx Any other comments, concerns: Orig Entered: 03/05/2025 05:39 EST Mcclurken, Mark RN 03/04/2025 16:55 DEV Safety Precautions: Fall Procaccini, Sherri RN Completed Fall Risk Interventions: N/A Inmate oriented to MDU surroundings  $Y \times N$ Νx N/A Is Inmate on medications that decrease alertness Y\_x\_\_ N\_ N/A Encourage Independence Y\_x\_\_ N Reorientation as needed; Verbal cues provided as needed N/A  $Y \times N$ N/A Bed in low position with wheels locked, Bed rails x 2  $Y \times N$ N/A Personal items within reach N/A \_\_\_ Nonslip, well-fitting footwear in use Y\_x\_\_ N\_ N/A \_\_\_ Y\_x\_\_ N Floor surfaces are clean, dry and free of clutter In close proximity to the Nurses station Y\_x\_ N N/A  $Y \times N$ Bathroom assistance offered every 2 hours N/A  $Y \times N$ N/A Assistive ambulatory device. If yes, what device(s): wheelchair N/A Frequent safety checks  $Y \times N$ N/A Asses comfort level to promote mobility Y\_x\_\_ N\_ N/A\_\_\_ Encourage brief periods of rest as needed Y\_x\_\_ N\_ N/A Avoid excessive stimuli  $Y \times N$ Any other comments, concerns: Orig Entered: 03/04/2025 16:55 EST Procaccini, Sherri RN 03/04/2025 14:47 DEV Nursing Intervention Procaccini, Sherri RN Completed no longer needed Orig Entered: 03/04/2025 14:48 EST Procaccini, Sherri RN 03/04/2025 08:08 DEV Safety Precautions: Fall Procaccini, Sherri RN Completed Fall Risk Interventions: N/A Inmate oriented to MDU surroundings  $Y \times N$ Νx N/A Is Inmate on medications that decrease alertness N/A Encourage Independence Y\_x\_\_ N\_ Y\_x\_\_ N\_ Reorientation as needed; Verbal cues provided as needed N/A Y\_x\_\_ N N/A Bed in low position with wheels locked, Bed rails x 2 Personal items within reach  $Y \times N$ N/A Nonslip, well-fitting footwear in use  $Y \times N$ N/A Floor surfaces are clean, dry and free of clutter  $Y \times N$ N/A N/A\_\_\_\_ Y\_x\_\_ N\_ In close proximity to the Nurses station N/A\_\_\_ Y\_x\_\_ N Bathroom assistance offered every 2 hours  $Y \times N$ N/A Assistive ambulatory device. If yes, what device(s): wheelchair N/A Frequent safety checks  $Y \times N$ Asses comfort level to promote mobility Y\_x\_\_ N\_ N/A Encourage brief periods of rest as needed N/A Ν Avoid excessive stimuli Ν N/A Any other comments, concerns: Orig Entered: 03/04/2025 08:08 EST Procaccini, Sherri RN Mcclurken, Mark RN 03/04/2025 06:30 DEV Safety Precautions: Fall Completed Fall Risk Interventions: Inmate oriented to MDU surroundings N/A N\_x\_ N/A Is Inmate on medications that decrease alertness N/A\_\_\_\_ Encourage Independence Y\_x\_\_ N\_ N/A Reorientation as needed; Verbal cues provided as needed  $Y \times N$ Bed in low position with wheels locked, Bed rails x 2  $Y \times N$ N/A

Υx

Ν

N/A Personal items within reach

Reg #: 07540-085 Inmate Name: ORENA, VICTOR

Treg #.	07340-003	Illinate Name. Often	A, VICTOR	
<u>Date</u>	<u>Time</u>	<u>Treatment</u> <u>Provider</u>		<u>Status</u>
Y_x		Nonslip, well-fitting footwear in use		
Y_x		Floor surfaces are clean, dry and free of clutter		
Y_x		In close proximity to the Nurses station		
Y_x		Bathroom assistance offered every 2 hours	a). walkar	
Y_x Yx_		Assistive ambulatory device. If yes, what device(s Frequent safety checks	s). Waikei	
Ϋ́ x ^_		Assess comfort level to promote mobility		
Y_x_				
Y_x	N N/A	Avoid excessive stimuli		
Any ot	her comments	s, concerns:		
Orig	Entered: 03/0	04/2025 06:30 EST Mcclurken, Mark RN		
03/03/2025	5 09:29 DEV	Safety Precautions: Fall Babineau, W	/illiam RN	Completed
	sk Interventior			
		Inmate oriented to MDU surroundings		
	Nx_ N/A	•		
Y_x Y_x		Encourage Independence Reorientation as needed; Verbal cues provided as	habaan s	
'_^_ Y_x		Bed in low position with wheels locked, Bed rails >		
Y_x		Personal items within reach		
Y_x	N N/A	Nonslip, well-fitting footwear in use		
Y_x		Floor surfaces are clean, dry and free of clutter		
Y_x		In close proximity to the Nurses station		
x_Y 1 Y	N N/A Nx N/A	Bathroom assistance offered every 2 hours Assistive ambulatory device. If yes, what device(s	s).	
Y_x			<i>5</i> ).	
Y_x		Asses comfort level to promote mobility		
Yx_				
Y_x		Avoid excessive stimuli		
•	her comments			
_		03/2025 09:29 EST Babineau, William RN	/''''	
		Safety Precautions: Fall Babineau, W	/IIIIam RN	Completed
	sk Intervention			
	N N/A Nx_N/A	Inmate oriented to MDU surroundings Is Inmate on medications that decrease alertness		
Υ <u>'</u> _x'				
Y_x		Reorientation as needed; Verbal cues provided as	s needed	
Y_x		Bed in low position with wheels locked, Bed rails >	<b>(</b> 2	
Y_x		Personal items within reach		
Y_x		Nonslip, well-fitting footwear in use		
Y_x Y_x		Floor surfaces are clean, dry and free of clutter In close proximity to the Nurses station		
'_^_ Y_x		Bathroom assistance offered every 2 hours		
1Y		Assistive ambulatory device. If yes, what device(s	s):	
Y_x		Frequent safety checks		
Y_x		Asses comfort level to promote mobility		
Yx_ Y x		Encourage brief periods of rest as needed Avoid excessive stimuli		
	her comments	•		
-		03/2025 09:27 EST Babineau, William RN		
_		/ Nursing Intervention Babineau, W	/illiam RN	Unavailable
		•	mani NV	The valiable
_		03/2025 09:25 EST Babineau, William RN	Billiana DNI	Commission
03/03/2025	O 09:25 DEV	Bath/Shower Babineau, W	ıllıam KN	Completed
OSH	Findaments 00%	00/2005 00:05 FCT   Daking and M/III'and DNI		
_		03/2025 09:25 EST Babineau, William RN	Acule DAI	Completed

03/03/2025 05:28 DEV Safety Precautions: Fall

Mcclurken, Mark RN

Completed

Reg #: 07540-085 Inmate Name: ORENA, VICTOR

Data	<u>Time</u>	Treatment	<u>Provider</u>	<u>Status</u>
<u>Date</u> Fall R	isk Intervention		<u>Flovidei</u>	Status
Y_x	_ N N/A	_ Inmate oriented to MDU surrou		
	N_x N/A	Is Inmate on medications that of Encourage Independence	decrease alertness	
Y_x Y_x		_ Encourage independence _ Reorientation as needed; Verb	al cues provided as needed	
Y_x	N N/A	Bed in low position with wheels		
Y_x Y x		Personal items within reach	LICO	
т_х Ү х		_ Nonslip, well-fitting footwear in _ Floor surfaces are clean, dry a		
Y_x	N N/A	In close proximity to the Nurse	s station	
Y_x Y_x		<ul><li>Bathroom assistance offered e</li><li>Assistive ambulatory device. It</li></ul>		
'_^_ Yx_		Assistive ambulatory device. In Frequent safety checks	i yes, what device(s). Walker	
Y_x	_ N N/A	Assess comfort level to promote		
Y_x Y x		_ Encourage brief periods of rest Avoid excessive stimuli	t as needed	
	ther commen			
Orig	Entered: 03	/03/2025 05:28 EST Mcclurken,	, Mark RN	
03/02/202	5 07:58 DE	V Safety Precautions: Fall	Procaccini, Sherri RN	Unavailable
osh				
Orig	Entered: 03	/02/2025 07:58 EST Procaccini	, Sherri RN	
03/02/202	5 07:57 DE	V Nursing Intervention	Procaccini, Sherri RN	Unavailable
osh				
_		/02/2025 07:58 EST Procaccini		
	5 07:57 DE	V Safety Precautions: Fall	Procaccini, Sherri RN	Unavailable
osh		/20/2020 20 20 20 20 20 20 20 20 20 20 20 20	0	
		/02/2025 07:57 EST Procaccini		0 111
03/02/202		•	Mcclurken, Mark RN	Completed
Y x	isk Interventid N N/A		ındinas	
Y	N_x N/A	Is Inmate on medications that o	•	
Y_x Y_x		_ Encourage Independence _ Reorientation as needed; Verb	al cues provided as peeded	
Y_X		_ Red in low position with wheels		
Y_x	N N/A	Personal items within reach		
Y_x Y_x		_ Nonslip, well-fitting footwear in _ Floor surfaces are clean, dry a		
'_^_ Y_x		_ In close proximity to the Nurse:		
Y_x	N N/A	Bathroom assistance offered e		
Y_x Yx_		_ Assistive ambulatory device. If Frequent safety checks	f yes, what device(s): walker	
Y_x_		_ Assess comfort level to promot	te mobility	
Y_x		_ Encourage brief periods of rest	t as needed	
Y_x_ Anv o	_ N N/A ther commen	_ Avoid excessive stimuli ts. concerns:		
-		/02/2025 06:56 EST Mcclurken,	, Mark RN	
_		V Safety Precautions: Fall	Asencio, Kariely	Unavailable
Orig	Entered: 03	/01/2025 07:34 EST Asencio, K	ariely Medical Assistant	
03/01/202	5 07:34 DE	V Safety Precautions: Fall	Asencio, Kariely	Unavailable
Orig	Entered: 03	/01/2025 07:34 EST Asencio, K	ariely Medical Assistant	
03/01/202	5 07:33 DE	V Nursing Intervention	Asencio, Kariely	Unavailable
Orig	Entered: 03	/01/2025 07:33 EST Asencio, K	ariely Medical Assistant	

Reg #: 07540-085 Inmate Name: ORENA, VICTOR

DateTimeTreatmentProviderStatus03/01/202506:29 DEVSafety Precautions: FallDuncan, L. RNUnavailable

OSH

Orig Entered: 03/01/2025 06:29 EST Duncan, L. RN

Total: 42

### Bureau of Prisons Health Services

#### **Vision Screens**

Reg #: 07540-085 Inmate Name: ORENA, VICTOR

Vision Screen on 11/21/2022 12:36

Blindness:

Distance Vision:OD:OS:OU:Near Vision:OD:OS:OU:

With Corrective

**Distance Vision:** OD: 20/400 OS: 20/50 OU: 20/50

Near Vision: OD: OS: OU:

Present Glasses - Distance Refraction - Distance

Sphere Cylinder Add Sphere Cylinder Axis Add Axis **R:** +0.50 -1.00 **R:** +1.50 135 +3 -1.25 180 +3 **L:** +0.25 -1.50 **L:** +1.00 163 +3 +3

**Color Test:** 

Tonometry: R: 11 L: 21

Comments: PH NI OD, OS

PERRL (-) APD minimal response to light OD > OS, pinhole pupils

EOMS jerky due to inattention but grossly full

CF unable

icare tonometry at 12:44

Dilated with 1 gtt 1% tropicamide, 1 gtt 2.5% phenylephrine at 12:44

Patient unable to understand refraction prompts.

Wet auto

OD: +1.87-1.25x180 OS: +1.00-0.37x59

Orig Entered: 11/21/2022 14:00 EST Resnick, J. OD

Vision Screen on 10/21/2021 16:11

Blindness:

Distance Vision:OD:OS:OU:Near Vision:OD:OS:OU:

With Corrective

Distance Vision:OD: 20/HM (Hand motion)OS: 20/50OU:Near Vision:OD:OS:OU:

Present Glasses - Distance Refraction - Distance

Sphere Cylinder Axis Add Sphere Cylinder Axis Add R: **R:** +0.25 -1.50 161 +3 L: **L:** +0.25 -1.50 161 +3

**Color Test:** 

Tonometry: R: 12 L: 14

Comments: icare

dilated 1.0% tropicamide

Orig Entered: 10/21/2021 16:12 EST Strake, Benjamin OD

#### Vision Screen on 12/09/2019 14:27

Blindness:

Distance Vision:OD: 20/Light PerceptionOS: 20/60OU:Near Vision:OD:OS:OU:

**With Corrective** 

Distance Vision:OD:OS:OU:Near Vision:OD:OS:OU:

Present Glasses - Distance Refraction - Distance

	Sphere	Cylinder	Axis	Add	Sphere	Cylinder	Axis	Add
R:	+2.75	-1.50	5	+2.5	R:			+3.5
L:	+2.75	-1.75	13	+2.5	L:	-1.50	10	+3.5

**Color Test:** 

Tonometry: R: L:

Comments: Difficulty responding to refraction prompts.

Orig Entered: 12/09/2019 15:18 EST Resnick, J. OD

Vision Screen on 07/29/2019 12:49

**Blindness:** 

**Distance Vision:** OD: 20/Light Perception OS: 20/50 OU: 20/50

Near Vision: OD: OS: OU:

With Corrective

Distance Vision:OD:OS:OU:Near Vision:OD:OS:OU:

Present Glasses - Distance Refraction - Distance

Sphere Cylinder Axis Add Sphere Cylinder Axis Add

R: R: L: L:

**Color Test:** 

Tonometry: R: 10 L: 10

Comments: PH NI OD, OS

PERRL no response to light OD, brisk constriction OS

EOMS: patient unable. CF: patient unable

iCare tonometry @ 12:55 PM

Dilated 1 gtt tropicamide 1%, 1 gtt phenylephrine 2.5% at 12:55 PM

Orig Entered: 07/29/2019 13:44 EST Resnick, J. OD

Vision Screen on 10/18/2018 11:39

Blindness:

Distance Vision:OD:OS:OU:Near Vision:OD:OS:OU:

**With Corrective** 

Distance Vision:OD: 20/CF (Counting Fingers)OS: 20/200OU:Near Vision:OD:OS:OU:

Present Glasses - Distance Refraction - Distance

Sphere Cylinder Axis Add Sphere Cylinder Axis Add

R: R: L: L:

**Color Test:** 

**Tonometry:** R: 10 L: 15

Comments:

Orig Entered: 10/18/2018 11:40 EST Maxon, T. OD

Vision Screen on 10/19/2017 08:31

Blindness:

Distance Vision:OD:OS:OU:Near Vision:OD:OS:OU:

With Corrective

Distance Vision:OD:OS:OU:Near Vision:OD:OS:OU:

Present Glasses - Distance Refraction - Distance

Sphere Cylinder Axis Add Sphere Cylinder Axis Add

R: R: L:

**Color Test:** 

Tonometry: R: 10 L: 11

**Comments:** Late entry: Patient seen by optometrist 10/18/17. See document manager for details.

Orig Entered: 10/19/2017 08:33 EST Leslie Pariseau, L. QIIC Nurse/RN

Vision Screen on 10/06/2017 09:37

Blindness:

Distance Vision:OD:OS:OU:Near Vision:OD:OS:OU:

With Corrective

Distance Vision:OD:OS:OU:Near Vision:OD:OS:OU:

Present Glasses - Distance Refraction - Distance

Sphere Cylinder Axis Add Sphere Cylinder Axis Add

R: R: L: L:

**Color Test:** 

**Tonometry:** R: 10 L: 10

Comments:

Orig Entered: 10/06/2017 09:38 EST Benoit, J. RN

Vision Screen on 07/27/2017 13:10

Blindness:

Distance Vision:OD:OS:OU:Near Vision:OD:OS:OU:

**With Corrective** 

Distance Vision:OD:OS:OU:Near Vision:OD:OS:OU:

Present Glasses - Distance Refraction - Distance

Sphere Cylinder Axis Add Sphere Cylinder Axis Add

R: R: L: L:

**Color Test:** 

Tonometry: R: 15 L: 21

Comments:

Orig Entered: 07/27/2017 13:11 EST Leslie Pariseau, L. QIIC Nurse/RN

Vision Screen on 04/10/2017 13:22

Blindness:

Distance Vision:OD:OS:OU:Near Vision:OD:OS:OU:

**With Corrective** 

Distance Vision:OD:OS:OU:Near Vision:OD:OS:OU:

Present Glasses - Distance Refraction - Distance

Sphere Cylinder Axis Add Sphere Cylinder Axis Add

R: R: L:

**Color Test:** 

Tonometry: R: 9 L: 13

Comments: Right eye tonometry screening low, team notified

Orig Entered: 04/10/2017 13:23 EST Leslie Pariseau, L. QIIC Nurse/RN

Vision Screen on 01/24/2017 14:29

Blindness:

Distance Vision:OD:OS:OU:Near Vision:OD:OS:OU:

**With Corrective** 

Distance Vision:OD:OS:OU:Near Vision:OD:OS:OU:

Present Glasses - Distance Refraction - Distance

Sphere Cylinder Axis Add Sphere Cylinder Axis Add

R: R: L:

**Color Test:** 

Tonometry: R: 8 L: 14

**Comments:** Right eye tonometry reading low, notified medical team.

Orig Entered: 01/24/2017 14:30 EST Leslie Pariseau, L. QIIC Nurse/RN

Vision Screen on 08/25/2016 16:50

Blindness:

Distance Vision: OD: OS: 20/60 OU: OU: **Near Vision:** OD: OS:

With Corrective

Distance Vision: OD: OS: OU: OS: OU: **Near Vision:** OD:

**Present Glasses - Distance Refraction - Distance** 

Sphere Cylinder Axis Add Sphere Cylinder Axis Add R: **R**: +1.75 +1.25 175 +2.5 L: **L:** +1.75 +1.25 175 +2.5

**Color Test:** 

Tonometry: R: 10 L: 10

Comments: OD: count fingers 8 feet. No improvement OU on pinhole.

Lids normal OU. Conjunctiva clear OU with superior Bleb OU. Peripheral iridectomies 12:00 OU. Lids and conjunctiva, normal OU. Corneas clear, bilateral arcus. Anterior chambers deep without inflammation. OS: Pupil peak 11:00. 1+ APD OD. Pseudophakia OU (s/p cataract surgery).

Fundus: OD Type IV 0.9 cup to disc ratio. Optic nerve pallor. OS: Type IV 0.6-0.7 cup to disc ratio.

Posterior pole Macula appears normal. Vessels narrow.

Above Refraction done at Glaucoma specialist office and noted here. NOT Ordered but would be: in 70F frame size 48/20/140, add +2.50, seg height 13mm, PD 59/57mm. Received last eye

glasses 12/2015. Not eligible until 12/2017.

Orig Entered: 08/25/2016 16:51 EST Howard, C. (MAT) MD/CD

Vision Screen on 08/25/2016 16:32

**Blindness:** 

Distance Vision:OD:OS:OU:Near Vision:OD:OS:OU:

With Corrective

Distance Vision:OD:OS:OU:Near Vision:OD:OS:OU:

Present Glasses - Distance Refraction - Distance

Sphere Cylinder Axis Add Sphere Cylinder Axis Add

R: R: L: L:

**Color Test:** 

**Tonometry:** R: L:

Comments: LOW VISION AID DISPENSED: Menas Lux 3.0 Item #143830

Receipt signed, one copy to Medical records for scanning, one copy to inmate. Educated,

practiced. Can read much better with aid.

Orig Entered: 08/30/2016 16:35 EST Howard, C. (MAT) MD/CD

Vision Screen on 07/15/2016 13:08

**Blindness:** 

Distance Vision:OD:OS:OU:Near Vision:OD:OS:OU:

With Corrective

Distance Vision:OD:OS:OU:Near Vision:OD:OS:OU:

Present Glasses - Distance Refraction - Distance

Sphere Cylinder Axis Add Sphere Cylinder Axis Add

R: R: L:

**Color Test:** 

Tonometry: R: L:

Comments: LOW VISIOIN CLINIC EVALUATION: Can read 20/160 up close. Trial of 8D/2X mag not much

help. Trial with Menas Lux 3.0 (product #143830) inmate can read 20/50 and can read 20/30 on

the numbers card. Requested order via e-mail as there are none in Low vision stock.

Orig Entered: 07/15/2016 13:11 EST Howard, C. (MAT) MD/CD

Vision Screen on 07/15/2016 11:29

Blindness:

Distance Vision:OD:OS:OU:Near Vision:OD:OS:OU:

With Corrective

Distance Vision:OD:OS:OU:Near Vision:OD:OS:OU:

Present Glasses - Distance Refraction - Distance

Sphere Cylinder Axis Add Sphere Cylinder Axis Add

R: R: L:

**Color Test:** 

Tonometry: R: L:

Comments: VISUAL FIELDS: OD: Vision count fingers 8 feet: Virtually no field. Tiny nasal island minimal

sensitivity. OS: Small islands very low residual vision.

Orig Entered: 07/15/2016 11:31 EST Howard, C. (MAT) MD/CD

Vision Screen on 06/09/2016 14:38

Blindness:

Distance Vision:OD:OS: 20/60OU:Near Vision:OD:OS:OU:

With Corrective

Distance Vision:OD:OS:OU:Near Vision:OD:OS:OU:

Present Glasses - Distance Refraction - Distance

Sphere Cylinder Axis Add Sphere Cylinder Axis Add

R: R: L: L:

**Color Test:** 

Tonometry: R: L:

**Comments:** OD count fingers 8 feet.

Dilate with Mydriacyl and 2.5% Neosyneprhine. Bilateral lens implants s/p cataract surgery, well positioned, centered. Optic nerve atrophy OU OD>OS. Type IV 0.9 cup to disc OD and 0.7 cup to

disc OS. Macula no edema. Vessels narrowed with crossing defects.

MACULAR SCAN (OCT): Poor quality, constant eye and head movement. However, no edema,

layers intact.

OPTIC NERVE SCAN (OCT): Poor quality due to excessive movement. End stage glaucoma OU.

Orig Entered: 06/09/2016 14:47 EST Howard, C. (MAT) MD/CD

Vision Screen on 05/12/2016 11:21

Blindness:

Distance Vision:OD:OS: 20/60OU:Near Vision:OD:OS:OU:

With Corrective

Distance Vision:OD:OS:OU:Near Vision:OD:OS:OU:

Present Glasses - Distance Refraction - Distance

Sphere Cylinder Axis Add Sphere Cylinder Axis Add

R: R: L:

**Color Test:** 

Tonometry: R: 13 L: 8

**Comments:** OD Count fingers 8 feet, no improvement on pinhole.

No improvement OS on pinhole.

Visual Fields: Markedly concentrically constricted OD. Constricted nasally and superotemporally OS. Bleb superiorly OU with small Peripheral iridectomies 12:00 OU. Lids, conjunctiva, normal OU. Corneas clear with arcus OU. Anterior chambers deep, uninflamed. Pupil peaked 11:00 OS. ? weak APD OD. Pseudophakia OU (s/p cataract surgery). Fundus Type IV 0.9 cup to disc ratio OD with optic nerve pallor. OS: Type IV 0.6-0.7 cup to disc ratio. Macula and vessels normal in posterior pole. (View restricted secondary to small pupils).

GONIOSCOPY: OD: open to scleral spur inferotemporaaly otherwise open to Trabecular meshwork. OS: unable to obtain adequate view, inmate squeezing. Fleeting views, Trabecular meshwork was visible.

Plan: Dilated exam, Visual fields, non urgent, elective. Renew meds.

Orig Entered: 05/12/2016 11:26 EST Howard, C. (MAT) MD/CD

Vision Screen on 03/30/2016 15:43 No Show

Comments: NO SHOW

I/M had 0730 callout. He was not present in hospital core at 0750 when writer went to core to retrieve callouts for that hour. His name was called twice and the callout type was called out loud twice. At approx. 1030 a staff member called from hospital core stating I/M Orena was in the hospital core since 0730. Inmate Orena twice more asked staff members to call writer between 1045 and 1115 saying he was there at 0730. He was not present when the remaining four (4) inmates on callout at 0750 were retrieved by this writer from the hospital core. Incident report done.

Orig Entered: 03/30/2016 15:44 EST Howard, C. (MAT) MD/CD

Vision Screen on 09/09/2015 10:56

Blindness: Bilateral

Distance Vision:OD: 20/Light PerceptionOS: 20/Light PerceptionOU: 20/Light PerceptionNear Vision:OD: 20/Light PerceptionOS: 20/Light PerceptionOU: 20/Light Perception

With Corrective

Distance Vision:OD:OS:OU:Near Vision:OD:OS:OU:

Present Glasses - Distance Refraction - Distance

Sphere Cylinder Axis Add Sphere Cylinder Axis Add

R: +5.00 L: +5.00

Color Test: Abnormal

Tonometry: R: 10 L: 12

Comments: HAS LOW VISION AID GLASSES TO READ BIG PRINT.

NEEDS TO OLD READING MATERIAL AT 2 INCHES TO SEE

Orig Entered: 09/09/2015 10:59 EST Weyand, James OD

Vision Screen on 05/20/2015 13:13

**Blindness:** 

 Distance Vision:
 OD: 20/400
 OS: 20/400
 OU: 20/400

 Near Vision:
 OD: 20/400
 OS: 20/400
 OU: 20/400

With Corrective

 Distance Vision:
 OD: 20/400
 OS: 20/400
 OU: 20/400

 Near Vision:
 OD: 20/400
 OS: 20/400
 OU: 20/400

Present Glasses - Distance Refraction - Distance

Sphere Cylinder Axis Add Sphere Cylinder Axis Add

Color Test: Abnormal

Tonometry: R: L:

Comments: OD C/D .6/.6

OS C/D .6/.6

**VERY POOR DISTANCE & NEAR VISION!** 

SEE OPHTHALMOLOGY CONSULT 5/12/15

LOW VISION AID

Orig Entered: 05/20/2015 13:18 EST Weyand, James OD

Vision Screen on 10/12/2012 09:51

Blindness:

**Distance Vision:** OD: 20/100 OS: 20/80 OU: 20/80

Near Vision: OD: OS: OU:

With Corrective

**Distance Vision:** OD: 20/100 OS: 20/80 OU: 20/80

Near Vision: OD: OS: OU:

Present Glasses - Distance Refraction - Distance

Sphere Cylinder Axis Add Sphere Cylinder Axis Add R: **R:** +1.00 90 +3 -0.50 -0.50 L: **L:** +1.00 90 +3

**Color Test:** 

Tonometry: R: 8 L: 8

Comments:

Orig Entered: 10/12/2012 09:53 EST Auxier, Donald OD

Vision Screen on 07/09/2012 13:53

Blindness:

Distance Vision:OD:OS:OU:Near Vision:OD:OS:OU:

**With Corrective** 

Distance Vision:OD:OS:OU:Near Vision:OD:OS:OU:

Present Glasses - Distance Refraction - Distance

Sphere Cylinder Axis Add Sphere Cylinder Axis Add

R: R: L: L:

**Color Test:** 

**Tonometry:** R: L: **Comments:** Completed 7-6-12

Orig Entered: 07/09/2012 13:55 EST Bixler, Tracy QIIC RN

Vision Screen on 11/02/2011 13:43

Blindness:

Distance Vision:OD:OS:OU:Near Vision:OD:OS:OU:

With Corrective

**Distance Vision:** OD: 20/40 OS: 20/40 OU: 20/40

Near Vision: OD: OS: OU:

Present Glasses - Distance Refraction - Distance

Sphere Cylinder Axis Add Sphere Cylinder Axis Add

R: R: L: L:

**Color Test:** 

Tonometry: R: 15 L: 15

Comments:

Orig Entered: 11/02/2011 13:45 EST Radaneata, Christian OD

Vision Screen on 10/05/2011 10:13

Blindness:

Distance Vision:OD:OS:OU:Near Vision:OD:OS:OU:

With Corrective

**Distance Vision:** OD: 20/40 OS: 20/40 OU: 20/40

Near Vision: OD: OS: OU:

Present Glasses - Distance Refraction - Distance

Sphere Cylinder Axis Add Sphere Cylinder Axis Add

R: R: L: L:

**Color Test:** 

Tonometry: R: 16 L: 18

Comments:

Orig Entered: 10/05/2011 10:14 EST Radaneata, Christian OD

# Bureau of Prisons Health Services Medication Summary Historical

 Complex:
 DEV--DEVENS FMC
 Begin Date:
 03/01/2025
 End Date:
 03/11/2025

 Inmate:
 ORENA, VICTOR
 Reg #:
 07540-085
 Quarter:
 N02-206L

Medications listed reflect prescribed medications from the begin date to end date on this report.

Allergies:

AllergyReactionDate NotedTopamaxIntolerance-other11/20/2007

**RXN UNKNOWN** 

**Active Prescriptions** 

Insulin NPH (10 ML) 100 UNITS/ML INJ

Inject 22 units of NPH insulin subcutaneously each evening \*\*\*pill line\*\*\*

Rx#: 674384-DEV Doctor: Churchville, Lawrence MD

**Start:** 02/25/25 **Exp:** 02/25/26 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 ML in 14 days

Insulin NPH (10 ML) 100 UNITS/ML INJ

Inject 22 units of NPH insulin subcutaneously each morning \*\*\*pill line\*\*\*

Rx#: 674385-DEV Doctor: Churchville, Lawrence MD

**Start:** 02/25/25 **Exp:** 02/25/26 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 ML in 14 days

Insulin NPH (10 ML) 100 UNITS/ML INJ

Inject 22 units of NPH insulin subcutaneously each evening \*\*\*pill line\*\*\*

Rx#: 675129-DEV Doctor: Churchville, Lawrence MD

**Start:** 03/03/25 **Exp:** 04/02/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 ML in 8 days

Insulin NPH (10 ML) 100 UNITS/ML INJ

Inject 22 units of NPH insulin subcutaneously each morning \*\*\*pill line\*\*\*

Rx#: 675130-DEV Doctor: Churchville, Lawrence MD

**Start:** 03/03/25 **Exp:** 04/02/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 ML in 8 days

Insulin NPH (10 ML) 100 UNITS/ML INJ

Inject 22 units of NPH insulin subcutaneously each evening \*\*\*pill line\*\*\*

Rx#: 675276-DEV Doctor: Churchville, Lawrence MD

Start: 03/04/25 Exp: 03/04/26 Pharmacy Dispensings: 0 ML in 7 days

Insulin NPH (10 ML) 100 UNITS/ML INJ

Inject 22 units of NPH insulin subcutaneously each morning \*\*\*pill line\*\*\*

Rx#: 675277-DEV Doctor: Churchville, Lawrence MD

Start: 03/04/25 Exp: 03/04/26 Pharmacy Dispensings: 0 ML in 7 days

Insulin Reg (10 ML) 100 UNITS/ML Inj

Inject 8 units of regular insulin subcutaneously each evening \*\*\*pill line\*\*\*

**Active Prescriptions** 

Rx#: 674386-DEV Doctor: Churchville, Lawrence MD

**Start:** 02/25/25 **Exp:** 02/25/26 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 ML in 14 days

Insulin Reg (10 ML) 100 UNITS/ML Inj

Inject 8 units of regular insulin subcutaneously each morning \*\*\*pill line\*\*\*

Rx#: 674387-DEV Doctor: Churchville, Lawrence MD

**Start:** 02/25/25 **Exp:** 02/25/26 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 ML in 14 days

Insulin Reg (10 ML) 100 UNITS/ML Inj

Inject 8 units of regular insulin subcutaneously each morning \*\*\*pill line\*\*\*

Rx#: 675131-DEV Doctor: Churchville, Lawrence MD

**Start:** 03/03/25 **Exp:** 04/02/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 ML in 8 days

Insulin Reg (10 ML) 100 UNITS/ML Inj

Inject 8 units of regular insulin subcutaneously each evening \*\*\*pill line\*\*\*

**Rx#:** 675132-DEV **Doctor:** Churchville, Lawrence MD

**Start:** 03/03/25 **Exp:** 04/02/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 ML in 8 days

Insulin Reg (10 ML) 100 UNITS/ML Inj

Inject 8 units of regular insulin subcutaneously each evening \*\*\*pill line\*\*\*

**Rx#:** 675278-DEV **Doctor:** Churchville, Lawrence MD

Start: 03/04/25 Exp: 03/04/26 Pharmacy Dispensings: 0 ML in 7 days

Insulin Reg (10 ML) 100 UNITS/ML Inj

Inject 8 units of regular insulin subcutaneously each morning \*\*\*pill line\*\*\*

Rx#: 675279-DEV Doctor: Churchville, Lawrence MD

Start: 03/04/25 Exp: 03/04/26 Pharmacy Dispensings: 0 ML in 7 days

Acetaminophen 325 MG Tab UD

Take two tablets (650 MG) by mouth three times daily \*\*\*pill line\*\*\*

Rx#: 674478-DEV Doctor: Churchville, Lawrence MD

**Start:** 02/26/25 **Exp:** 08/25/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 TAB in 13 days

Acetaminophen 325 MG Tab UD

Take two tablets (650 MG) by mouth three times daily \*\*\*pill line\*\*\*

Rx#: 675115-DEV Doctor: Churchville, Lawrence MD

**Start:** 03/03/25 **Exp:** 03/17/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 TAB in 8 days

Acetaminophen 325 MG Tab UD

Take two tablets (650 MG) by mouth three times daily \*\*\*pill line\*\*\* **Rx#:** 675263-DEV **Doctor:** Churchville, Lawrence MD

Start: 03/04/25 Exp: 08/31/25 Pharmacy Dispensings: 0 TAB in 7 days

## **Active Prescriptions**

Amoxicillin/Clav 875/125MG TAB

Take one tablet by mouth twice daily for 7 days \*\*\*It is important to finish ALL of this medication\*\*\* \*\*\*pill line\*\*\*

**Rx#:** 674135-DEV **Doctor:** Riley, E. NP-C

Start: 02/24/25 Exp: 03/03/25 Pharmacy Dispensings: 0 TAB in 7 days

Aspirin 81 MG EC Tab UD

Take one tablet (81 MG) by mouth each day \*\*\*pill line\*\*\* **Rx#**: 674479-DEV **Doctor**: Churchville, Lawrence MD

**Start:** 02/26/25 **Exp:** 02/26/26 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 TAB in 13 days

Aspirin 81 MG EC Tab UD

Take one tablet (81 MG) by mouth each day \*\*\*pill line\*\*\*

Rx#: 675116-DEV Doctor: Churchville, Lawrence MD

**Start:** 03/03/25 **Exp:** 03/17/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 TAB in 8 days

Aspirin 81 MG EC Tab UD

Take one tablet (81 MG) by mouth each day \*\*\*pill line\*\*\*

Rx#: 675264-DEV Doctor: Churchville, Lawrence MD

Start: 03/04/25 Exp: 08/31/25 Pharmacy Dispensings: 0 TAB in 7 days

Atorvastatin 20 MG TAB UD

Take one tablet (20 MG) by mouth each evening for control of cholesterol \*\*\*pill line\*\*\*

**Rx#:** 674480-DEV **Doctor:** Churchville, Lawrence MD

**Start:** 02/26/25 **Exp:** 02/26/26 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 TAB in 13 days

Atorvastatin 20 MG TAB UD

Take one tablet (20 MG) by mouth each evening for control of cholesterol \*\*\*pill line\*\*\*

Rx#: 675117-DEV Doctor: Churchville, Lawrence MD

**Start:** 03/03/25 **Exp:** 03/17/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 TAB in 8 days

Atorvastatin 20 MG TAB UD

Take one tablet (20 MG) by mouth each evening for control of cholesterol \*\*\*pill line\*\*\*

Rx#: 675265-DEV Doctor: Churchville, Lawrence MD

Start: 03/04/25 Exp: 03/04/26 Pharmacy Dispensings: 0 TAB in 7 days

Bisacodyl E.C. 5 MG TAB UD

Take one tablet (5 MG) by mouth each day AS NEEDED for constipation \*\*\*pill line\*\*\*

**Rx#**: 674481-DEV **Doctor**: Churchville, Lawrence MD

**Start:** 02/26/25 **Exp:** 08/25/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 TAB in 13 days

Bisacodyl E.C. 5 MG TAB UD

Take one tablet (5 MG) by mouth each day AS NEEDED for constipation \*\*\*pill line\*\*\*

Rx#: 675118-DEV Doctor: Churchville, Lawrence MD

**Active Prescriptions** 

**Start:** 03/03/25 **Exp:** 03/17/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 TAB in 8 days

Bisacodyl E.C. 5 MG TAB UD

Take one tablet (5 MG) by mouth each day AS NEEDED for constipation \*\*\*pill line\*\*\*

**Rx#:** 675266-DEV **Doctor:** Churchville, Lawrence MD

Start: 03/04/25 Exp: 08/31/25 Pharmacy Dispensings: 0 TAB in 7 days

Citalopram 10 MG Tab UD

Take one tablet (10 MG) by mouth every night at bedtime \*\*\*pill line\*\*\*

Rx#: 671075-DEV Doctor: Churchville, Lawrence MD

**Start:** 01/31/25 **Exp:** 07/30/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 TAB in 39 days

Citalopram 10 MG Tab UD

Take one tablet (10 MG) by mouth every night at bedtime \*\*\*pill line\*\*\*

Rx#: 675120-DEV Doctor: Churchville, Lawrence MD

Start: 03/03/25 Exp: 03/17/25 Pharmacy Dispensings: 0 TAB in 8 days

Clopidogrel Bisulfate 75 MG Tab UD

Take one tablet (75 MG) by mouth daily \*\*\*pill line\*\*\*

Rx#: 674483-DEV Doctor: Churchville, Lawrence MD

**Start:** 02/26/25 **Exp:** 02/26/26 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 TAB in 13 days

Clopidogrel Bisulfate 75 MG Tab UD

Take one tablet (75 MG) by mouth daily \*\*\*pill line\*\*\*

Rx#: 675268-DEV Doctor: Churchville, Lawrence MD

Start: 03/04/25 Exp: 03/04/26 Pharmacy Dispensings: 0 TAB in 7 days

Clopidogrel Bisulfate 75 MG Tab UD

Take one tablet (75 MG) by mouth daily \*\*\*pill line\*\*\*

Rx#: 675352-DEV Doctor: Churchville, Lawrence MD

**Start:** 03/03/25 **Exp:** 04/02/25 **D/C:** 03/05/25 **Pharmacy Dispensings:** 0 TAB in 8 days

Cromolyn OPHTH Solution 4%, 10ML

Place 2 drops in both eyes four times daily \*\*\*pill line\*\*\*

Rx#: 674484-DEV Doctor: Churchville, Lawrence MD

**Start:** 02/26/25 **Exp:** 02/26/26 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 ML in 13 days

Cromolyn OPHTH Solution 4%, 10ML

Place 2 drops in both eyes four times daily \*\*\*pill line\*\*\*

Rx#: 675121-DEV Doctor: Churchville, Lawrence MD

**Start:** 03/03/25 **Exp:** 03/17/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 ML in 8 days

Cromolyn OPHTH Solution 4%, 10ML

## **Active Prescriptions**

Place 2 drops in both eyes four times daily \*\*\*pill line\*\*\*

**Rx#**: 675269-DEV **Doctor**: Churchville, Lawrence MD

Start: 03/04/25 Exp: 08/31/25 Pharmacy Dispensings: 0 ML in 7 days

diphenhydrAMINE 25 MG Cap UD

Take two capsules (50 MG) by mouth at bedtime \*\*\*pill line\*\*\*

Rx#: 676276-DEV Doctor: Fandreyer, F. FNP

Start: 03/10/25 Exp: 03/24/25 Pharmacy Dispensings: 0 CAP in 1 day

Docusate Sodium 100 MG Cap UD

Take one capsule (100 MG) by mouth twice daily AS NEEDED for hard or infrequent stools - Take with a glassful of water

\*\*\*pill line\*\*\*

Rx#: 674485-DEV Doctor: Churchville, Lawrence MD

**Start:** 02/26/25 **Exp:** 08/25/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 CAP in 13 days

Docusate Sodium 100 MG Cap UD

Take one capsule (100 MG) by mouth twice daily AS NEEDED for hard or infrequent stools - Take with a glassful of water

\*\*\*pill line\*\*\*

Rx#: 675122-DEV Doctor: Churchville, Lawrence MD

**Start:** 03/03/25 **Exp:** 03/17/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 CAP in 8 days

Docusate Sodium 100 MG Cap UD

Take one capsule (100 MG) by mouth twice daily AS NEEDED for hard or infrequent stools - Take with a glassful of water

\*\*\*pill line\*\*\*

Rx#: 675270-DEV Doctor: Churchville, Lawrence MD

Start: 03/04/25 Exp: 08/31/25 Pharmacy Dispensings: 0 CAP in 7 days

Donepezil HCL 5 MG Tab UD

Take one tablet (5 MG) by mouth each morning \*\*\*pill line\*\*\*

Rx#: 671060-DEV Doctor: Churchville, Lawrence MD

**Start:** 01/31/25 **Exp:** 07/30/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 TAB in 39 days

Donepezil HCL 5 MG Tab UD

Take one tablet (5 MG) by mouth each morning \*\*\*pill line\*\*\*

**Rx#**: 675123-DEV **Doctor**: Churchville, Lawrence MD

**Start:** 03/03/25 **Exp:** 03/17/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 TAB in 8 days

Donepezil HCL 5 MG Tab UD

Take one tablet (5 MG) by mouth each morning \*\*\*pill line\*\*\*

Rx#: 675271-DEV Doctor: Churchville, Lawrence MD

Start: 03/04/25 Exp: 08/31/25 Pharmacy Dispensings: 0 TAB in 7 days

Dorzolamide-Timolol Opht Soln 22.3-6.8mg/ml 10ML

Place 1 drop in both eyes twice daily \*\*\*pill line\*\*\*

**Active Prescriptions** 

Rx#: 674486-DEV Doctor: Churchville, Lawrence MD

**Start:** 02/26/25 **Exp:** 02/26/26 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 ML in 13 days

Dorzolamide-Timolol Opht Soln 22.3-6.8mg/ml 10ML Place 1 drop in both eyes twice daily \*\*\*pill line\*\*\*

**Rx#**: 675124-DEV **Doctor**: Churchville, Lawrence MD

**Start:** 03/03/25 **Exp:** 03/17/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 ML in 8 days

Dorzolamide-Timolol Opht Soln 22.3-6.8mg/ml 10ML Place 1 drop in both eyes twice daily \*\*\*pill line\*\*\*

Rx#: 675272-DEV Doctor: Churchville, Lawrence MD

Start: 03/04/25 Exp: 08/31/25 Pharmacy Dispensings: 0 ML in 7 days

Doxycycline Hyclate 100 MG Tab UD

Take one capsule (100 MG) by mouth twice daily for 7 days \*\*\*pill line\*\*\*

Rx#: 674136-DEV Doctor: Riley, E. NP-C

Start: 02/24/25 Exp: 03/03/25 Pharmacy Dispensings: 0 TAB in 7 days

Famotidine 20 MG Tab

Take one tablet (20 MG) by mouth twice daily \*\*\*pill line\*\*\* **Rx#:** 676113-DEV **Doctor:** Fandreyer, F. FNP

Start: 03/10/25 Exp: 04/09/25 Pharmacy Dispensings: 0 TAB in 1 day

Ferrous Gluconate 324 MG Tab UD

Take one tablet by mouth three times a week on Monday, Wednesday, and Friday on empty stomach \*\*\*pill line\*\*\*

Rx#: 674487-DEV Doctor: Churchville, Lawrence MD

**Start:** 02/26/25 **Exp:** 02/26/26 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 TAB in 13 days

Ferrous Gluconate 324 MG Tab UD

Take one tablet by mouth three times a week on Monday, Wednesday, and Friday on empty stomach \*\*\*pill line\*\*\*

**Rx#:** 675125-DEV **Doctor:** Churchville, Lawrence MD

**Start:** 03/04/25 **Exp:** 03/18/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 TAB in 7 days

Ferrous Gluconate 324 MG Tab UD

Take one tablet by mouth three times a week on Monday, Wednesday, and Friday on empty stomach \*\*\*pill line\*\*\*

Rx#: 675273-DEV **Doctor**: Churchville, Lawrence MD

Start: 03/04/25 Exp: 08/31/25 Pharmacy Dispensings: 0 TAB in 7 days

Furosemide 40 MG Tab UD

Take one tablet (40 MG) by mouth twice daily morning and at noon Hold his systolic blood pressure <100 \*\*\*pill line\*\*\*

**Rx#:** 674413-DEV **Doctor:** Quist, Daniel (MOUD-M) PA-C

**Start:** 02/26/25 **Exp:** 02/26/26 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 TAB in 13 days

## **Active Prescriptions**

Furosemide 40 MG Tab UD

Take one tablet (40 MG) by mouth twice daily morning and at noon \*Do not give if systolic blood pressure <100 \*\*\*pill

line\*\*\*

Rx#: 675126-DEV Doctor: Churchville, Lawrence MD

**Start:** 03/03/25 **Exp:** 03/17/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 TAB in 8 days

Furosemide 40 MG Tab UD

Take one tablet (40 MG) by mouth twice daily morning and at noon \*Do not give if systolic blood pressure <100 \*\*\*pill

line\*\*\*

**Rx#:** 675274-DEV **Doctor:** Churchville, Lawrence MD

Start: 03/04/25 Exp: 08/31/25 Pharmacy Dispensings: 0 TAB in 7 days

Glucose 4 GM Tab

Chew and swallow 4 tablets (16 GM) by mouth AS NEEDED for hypoglycemia and alert medical \*\*\*pill line\*\*\*

Rx#: 674488-DEV Doctor: Churchville, Lawrence MD

**Start:** 02/26/25 **Exp:** 02/26/26 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 TAB in 13 days

Glucose 4 GM Tab

Chew and swallow 4 tablets (16 GM) by mouth AS NEEDED for hypoglycemia and alert medical \*\*\*pill line\*\*\*

Rx#: 675127-DEV Doctor: Churchville, Lawrence MD

**Start:** 03/03/25 **Exp:** 03/17/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 TAB in 8 days

Glucose 4 GM Tab

Chew and swallow 4 tablets (16 GM) by mouth AS NEEDED for hypoglycemia and alert medical \*\*\*pill line\*\*\*

Rx#: 675275-DEV Doctor: Churchville, Lawrence MD

Start: 03/04/25 Exp: 08/31/25 Pharmacy Dispensings: 0 TAB in 7 days

guaiFENesin ER Tab 12 Hr 600 MG UD

Take one tablet (600 MG) by mouth twice daily AS NEEDED for secretions related to for cough \*\*\*pill line\*\*\*

**Rx#:** 674489-DEV **Doctor:** Churchville, Lawrence MD

**Start:** 02/26/25 **Exp:** 03/08/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 TAB in 10 days

guaiFENesin ER Tab 12 Hr 600 MG UD

Take one tablet (600 MG) by mouth twice daily AS NEEDED for secretions related to for cough \*\*non-formulary approved

until: 3/8/25 \*\*\*pill line\*\*\*

Rx#: 675128-DEV Doctor: Churchville, Lawrence MD

Start: 03/03/25 Exp: 03/08/25 Pharmacy Dispensings: 0 TAB in 5 days

Latanoprost Ophth Soln 0.005% [2.5ml]

Place 1 drop in both eyes each evening \*\*\*pill line\*\*\*

Rx#: 674490-DEV Doctor: Churchville, Lawrence MD

**Start:** 02/26/25 **Exp:** 02/26/26 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 ML in 13 days

Latanoprost Ophth Soln 0.005% [2.5ml]

## **Active Prescriptions**

Place 1 drop in both eyes each evening \*\*\*pill line\*\*\*

Rx#: 675133-DEV Doctor: Churchville, Lawrence MD

**Start:** 03/03/25 **Exp:** 03/17/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 ML in 8 days

Latanoprost Ophth Soln 0.005% [2.5ml]

Place 1 drop in both eyes each evening \*\*\*pill line\*\*\*

Rx#: 675280-DEV Doctor: Churchville, Lawrence MD

Start: 03/04/25 Exp: 08/31/25 Pharmacy Dispensings: 0 ML in 7 days

Memantine 10 MG Tab

Take one tablet (10 MG) by mouth twice daily \*\*\*pill line\*\*\* **Rx#**: 671070-DEV **Doctor**: Churchville, Lawrence MD

**Start:** 01/31/25 **Exp:** 07/30/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 TAB in 39 days

Memantine 10 MG Tab

Take one tablet (10 MG) by mouth twice daily \*\*\*pill line\*\*\*

Rx#: 675134-DEV Doctor: Churchville, Lawrence MD

**Start:** 03/03/25 **Exp:** 03/17/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 TAB in 8 days

Memantine 10 MG Tab

Take one tablet (10 MG) by mouth twice daily \*\*\*pill line\*\*\* **Rx#:** 675281-DEV **Doctor:** Churchville. Lawrence MD

Start: 03/04/25 Exp: 08/31/25 Pharmacy Dispensings: 0 TAB in 7 days

Nystatin Powder 100,000 UNIT/GM [30 GM]

Apply topically to the affected area(s) three times daily (inguinal/groin, pannus) \*\*non-formulary approved until: 4/2/25

\*\*\*pill line\*\*\*

**Rx#**: 674491-DEV **Doctor**: Churchville, Lawrence MD

**Start:** 02/26/25 **Exp:** 04/02/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 GM in 13 days

Nystatin Powder 100,000 UNIT/GM [30 GM]

Apply topically to the affected area(s) three times daily (inguinal/groin, pannus) \*\*non-formulary approved until: 4/2/25

\*\*\*pill line\*\*\*

**Rx#:** 675135-DEV **Doctor:** Churchville, Lawrence MD

**Start:** 03/03/25 **Exp:** 03/17/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 GM in 8 days

Nystatin Powder 100,000 UNIT/GM [30 GM]

Apply topically to the affected area(s) three times daily (inguinal/groin, pannus) \*\*non-formulary approved until: 4/2/25

\*\*\*pill line\*\*\*

**Rx#**: 675282-DEV **Doctor**: Churchville, Lawrence MD

Start: 03/04/25 Exp: 03/18/25 Pharmacy Dispensings: 0 GM in 7 days

Potassium Chloride 20 mEq ER Tab UD

Take one tablet (20 MEQ) by mouth each day \*\*\*pill line\*\*\*

**Active Prescriptions** 

Rx#: 675204-DEV Doctor: Churchville, Lawrence MD

**Start:** 03/04/25 **Exp:** 03/10/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 TAB in 6 days

Potassium Chloride 20 mEq ER Tab UD

Take one tablet (20 MEQ) by mouth each day \*\*\*pill line\*\*\* **Rx#:** 676143-DEV **Doctor:** Churchville, Lawrence MD

Start: 03/10/25 Exp: 09/06/25 Pharmacy Dispensings: 0 TAB in 1 day

risperiDONE 0.5 MG Tab UD

Take one tablet (0.5 MG) by mouth each day AS NEEDED for agitation \*\*\*pill line\*\*\*

Rx#: 671137-DEV Doctor: Churchville, Lawrence MD

**Start:** 01/31/25 **Exp:** 07/30/25 **D/C:** 03/05/25 **Pharmacy Dispensings:** 0 TAB in 39 days

risperiDONE 0.5 MG Tab UD

Take one tablet (0.5 MG) by mouth each day AS NEEDED for agitation \*\*\*pill line\*\*\*

**Rx#:** 675353-DEV **Doctor:** Churchville, Lawrence MD

Start: 03/03/25 Exp: 03/17/25 Pharmacy Dispensings: 0 TAB in 8 days

Spironolactone 25 MG Tab UD

Take one-half (1/2) tablet (12.5 MG) by mouth each day \*\*\*pill line\*\*\*

**Rx#:** 674492-DEV **Doctor:** Churchville, Lawrence MD

**Start:** 02/26/25 **Exp:** 08/25/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 TAB in 13 days

Spironolactone 25 MG Tab UD

Take one-half (1/2) tablet (12.5 MG) by mouth each day \*\*\*pill line\*\*\*

Rx#: 675144-DEV Doctor: Churchville, Lawrence MD

**Start:** 03/03/25 **Exp:** 04/02/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 TAB in 8 days

Spironolactone 25 MG Tab UD

Take one-half (1/2) tablet (12.5 MG) by mouth each day \*\*\*pill line\*\*\*

Rx#: 675283-DEV Doctor: Churchville, Lawrence MD

Start: 03/04/25 Exp: 03/04/26 Pharmacy Dispensings: 0 TAB in 7 days

Tamsulosin HCI 0.4 MG Cap UD

Take one capsule (0.4 MG) by mouth each day \*\*\*pill line\*\*\* **Rx#:** 675284-DEV **Doctor:** Churchville, Lawrence MD

Start: 03/04/25 Exp: 08/31/25 Pharmacy Dispensings: 0 CAP in 7 days

traZODone HCI 50 MG Tab UD

Take one tablet (50 MG) by mouth at bedtime AS NEEDED for agitation \*\*\*pill line\*\*\*

Rx#: 671138-DEV Doctor: Churchville, Lawrence MD

**Start:** 01/31/25 **Exp:** 07/30/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 TAB in 39 days

# **Active Prescriptions**

traZODone HCI 50 MG Tab UD

Take one tablet (50 MG) by mouth at bedtime AS NEEDED for agitation \*\*\*pill line\*\*\*

Rx#: 675145-DEV Doctor: Churchville, Lawrence MD

Start: 03/03/25 Exp: 04/02/25 Pharmacy Dispensings: 0 TAB in 8 days

Triamcinolone 0.1% 15 GM Cream

Apply a small amount topically to the affected area(s) of torso twice daily for 14 days \*\*\*pill line\*\*\*

**Rx#:** 676115-DEV **Doctor:** Fandreyer, F. FNP

**Start:** 03/10/25 **Exp:** 03/24/25 **Pharmacy Dispensings:** 15 GM in 1 day

Cholecalciferol (Vit D) 50,000 UNIT (1.25 mg)Cap

Take one capsule by mouth once a month on the first of the month \*\*\*pill line\*\*\*

Rx#: 674482-DEV Doctor: Churchville, Lawrence MD

**Start:** 02/26/25 **Exp:** 02/26/26 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 CAP in 13 days

Cholecalciferol (Vit D) 50,000 UNIT (1.25 mg)Cap

Take one capsule by mouth once a month on the first of the month \*\*\*pill line\*\*\*

Rx#: 675119-DEV Doctor: Churchville, Lawrence MD

**Start:** 03/04/25 **Exp:** 03/18/25 **D/C:** 03/04/25 **Pharmacy Dispensings:** 0 CAP in 7 days

Cholecalciferol (Vit D) 50,000 UNIT (1.25 mg)Cap

Take one capsule by mouth once a month on the first of the month \*\*\*pill line\*\*\*

Rx#: 675267-DEV Doctor: Churchville, Lawrence MD

Start: 03/04/25 Exp: 08/31/25 Pharmacy Dispensings: 0 CAP in 7 days



# **FMC DEVENS**

42 Patton Rd Ayer, MA 01432 978-796-1000

\*\*\* Sensitive But Unclassified \*\*\*

 Name
 ORENA, VICTOR
 Facility FMC Devens
 Collected 03/10/2025 12:08 EDT

 Reg # 07540-085
 Order Unit N02-206L
 Received 03/10/2025 12:08 EDT

 DOB 08/04/1934
 Provider Lawrence Churchville, MD
 Reported 03/10/2025 13:05 EDT

 Sex
 M
 LIS ID 063251983

		CHEMISTRY		
Sodium		141	137-145	mmol/L
Potassium	L	3.3	3.5-5.1	mmol/L
Chloride		98	98-107	mmol/L
Carbon Dioxide	Н	37	22-30	mmol/L
Urea Nitrogen (BUN)		18	9-20	mg/dL
Creatinine		1.03	0.66-1.25	mg/dL
eGFR (CKD-EPI 2021)		>60		
GFR units measured as m A calculated GFR <60 sug		y disease if found over a 3 mo	nth period.	
Calcium		9.0	8.4-10.2	mg/dL
Glucose	Н	118	74-106	mg/dL
Anion Gap	L	6.0	9.0-19.0	





Report Status: Final ORENA, VICTOR

Patient Information	Specimen Information	Client Information	
ORENA, VICTOR	Specimen: WC480451F Requisition: 9836325	Client #: 10767124 CA000000 FANDREYER, FELICITAS	
DOB: 08/04/1934 AGE: 90 Gender: M Phone: NG Patient ID: 07540-085	Lab Ref #: 037252184  Collected: 03/07/2025 / 12:11 EDT Received: 03/08/2025 / 11:42 EDT Reported: 03/09/2025 / 03:13 EDT	FMC-DEVENS 42 PATTON RD DEVENS, MA 01434-3802	

Test Name BASIC METABOLIC PANEL	In Range	Out Of Range	Reference Range	<b>Lab</b> NL2	
GLUCOSE		52 L	65-99 mg/dL	NHZ	
		Fa	sting reference interval		
UREA NITROGEN (BUN) CREATININE EGFR BUN/CREATININE RATIO	17 1.13 62 SEE NOTE: Not Report		7-25 mg/dL 0.70-1.22 mg/dL > OR = 60 mL/min/1.73m2 6-22 (calc) reatinine are within		
SODIUM POTASSIUM CHLORIDE CARBON DIOXIDE CALCIUM	144 3.5 100 9.1	36 н	135-146 mmol/L 3.5-5.3 mmol/L 98-110 mmol/L 20-32 mmol/L 8.6-10.3 mg/dL		

### **PERFORMING SITE:**

NL2 QUEST DIAGNOSTICS MASSACHUSETTS LLC, 200 FOREST STREET, MARLBOROUGH, MA 01752-3023 Laboratory Director: SALIM E KABAWAT,MD, CLIA: 22D2051942

CLIENT SERVICES: 1.866.697.8378 SPECIMEN: WC480451F PAGE 1 OF 1

PATIENT INFORMATION CLIENT INFORMATION

ORENA, VICTOR

QUEST DIAGNOSTICS INCORPORATED CLIENT SERVICE 866.697.8378

DOB: 08/04/1934 Age: 90 10767124 SEX: M FMC-DEVENS

ID: 07540-085 42 PATTON RD

DEVENS, MA 01434-3802

# Cumulative Report - Reported Date & Time

Chemistry 09/18/2023

16:37

CULTURE SEE NOTE

# Bureau of Prisons Health Services Cosign/Review

Inmate Name:ORENA, VICTORReg #:07540-085Date of Birth:08/04/1934Sex:MRace:WHITEEncounter Date:03/09/2025 03:15Provider:Lab Result ReceiveFacility:DEV

Cosigned by Churchville, Lawrence MD on 03/10/2025 11:39.

# Bureau of Prisons Health Services Cosign/Review

Inmate Name:ORENA, VICTORReg #:07540-085Date of Birth:08/04/1934Sex:MRace:WHITEEncounter Date:03/09/2025 03:15Provider:Lab Result ReceiveFacility:DEV

Reviewed by Fandreyer, F. FNP on 03/10/2025 11:48.

#### Federal Bureau of Prisons

# **FMC DEVENS**

42 Patton Rd Ayer, MA 01432 978-796-1000

\*\*\* Sensitive But Unclassified \*\*\*

 Name
 ORENA, VICTOR
 Facility FMC Devens
 Collected 03/05/2025 14:28 EST

 Reg # 07540-085
 Order Unit N02-206L
 Received 03/05/2025 14:28 EST

 DOB 08/04/1934
 Provider Lawrence Churchville, MD
 Reported 03/05/2025 15:07 EST

 Sex M
 LIS ID 063251375

		CHEMISTRY		
Sodium		141	137-145	mmol/L
Potassium		3.5	3.5-5.1	mmol/L
Chloride		99	98-107	mmol/L
Carbon Dioxide	Н	36	22-30	mmol/L
Urea Nitrogen (BUN)		13	9-20	mg/dL
Creatinine		1.11	0.66-1.25	mg/dL
eGFR (CKD-EPI 2021)		>60		
GFR units measured as m A calculated GFR <60 sug		y disease if found over a 3 mo	onth period.	
Calcium		9.1	8.4-10.2	mg/dL
Glucose		87	74-106	mg/dL
Anion Gap	L	6.0	9.0-19.0	

# Bureau of Prisons Health Services Cosign/Review

Inmate Name:ORENA, VICTORReg #:07540-085Date of Birth:08/04/1934Sex:MRace:WHITEEncounter Date:03/05/2025 15:07Provider:Lab Result ReceiveFacility:DEV

Cosigned by Churchville, Lawrence MD on 03/10/2025 11:39.



# **FMC DEVENS**

42 Patton Rd Ayer, MA 01432 978-796-1000

\*\*\* Sensitive But Unclassified \*\*\*

 Name
 ORENA, VICTOR
 Facility FMC Devens
 Collected 03/04/2025 10:47 EST

 Reg # 07540-085
 Order Unit N02-206L
 Received 03/04/2025 10:48 EST

 DOB 08/04/1934
 Provider Lawrence Churchville, MD
 Reported 03/04/2025 11:56 EST

 Sex M
 LIS ID 063251376

CHEMISTRY				
Sodium		143	137-145	mmol/L
Potassium		3.7	3.5-5.1	mmol/L
Chloride		99	98-107	mmol/L
Carbon Dioxide	Н	35	22-30	mmol/L
Urea Nitrogen (BUN)		13	9-20	mg/dL
Creatinine		0.99	0.66-1.25	mg/dL
eGFR (CKD-EPI 2021)		>60		
GFR units measured as m A calculated GFR <60 sug		y disease if found over a 3 mc	onth period.	
Calcium		9.8	8.4-10.2	mg/dL
Glucose		102	74-106	mg/dL
Anion Gap		9.0	9.0-19.0	

# Bureau of Prisons Health Services Cosign/Review

Inmate Name:ORENA, VICTORReg #:07540-085Date of Birth:08/04/1934Sex:MRace:WHITEEncounter Date:03/04/2025 12:07Provider:Lab Result ReceiveFacility:DEV

Cosigned by Churchville, Lawrence MD on 03/04/2025 15:45.



#### **FMC Devens DEV**

DOB:

Age:

Status:

08/04/34

90

OP

Patient:

**ORENA, VICTOR (Male)** 

Register#: Date:

07540-085 03/10/25 12:54

Slicecount:

History: Priors:

CHF

Exams:

XR CXR 2 VIEWS Referring Phy: Churchville L. MD

Ordering Phy: Ordering Phy #:

Accession Numbers: 1,2,840,113619,2,203,4,2147483647,1741623256,803579

#### Final Report

#### Exam: XR CXR 2 VIEWS

HISTORY: See above

TECHNIQUE: Frontal and Lateral views obtained

**COMPARISON: 02/25/25** 

FINDINGS: The cardiac silhouette is enlarged. Low lung volumes. Left chest abandoned pacemaker leads. Right chest pacemaker stable. There is diminished pulmonary vascular congestion. There is persistent right base consolidation. There is bilateral pleural effusion likely diminished. No pneumothorax. Thoracic musculoskeletal structures are age appropriate.

#### IMPRESSION:

Diminished pulmonary vascular congestion.

Persistent right base consolidation with suspected diminished bilateral pleural effusions.

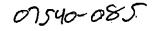
#### Stable cardiomegaly.

Radiologist:

Maurice Yu, MD

Study first marked ready to read at 12:55, study last marked ready to read at 12:55, initial results transmitted at 13:23

#### Heywood Hospital 242 Green St. Gardner, MA 01440



# Critical Care History&Physical Signed

Patient: Orena, Victor DOB: 08/04/1934 Age/Sex: 90 / M

Loc: HE.ICU . W107-1 Attending Dr: Keshav Parthasarathy MD MR#: H000431760 Acct:HH0070081237

cc: ~

## **History of Present Illness**

Date of Service: 03/05/25

Chief Complaint: shortness of breath

Victor Orena is a 90 y.o. male with a past medical history of CAD s/p DES to mid LAD (2022), AV block s/p PPM, HFrEF (LVEF 30% 2022), AAA s/p repair in 2019, HTN, HLD, IDDM2, CVA, Alzheimer's dementia, currently federally incarcerated initially presented to UMass-Leominster ED on 1/17/2025 with acute hypoxemic and hypercapnic respiratory failure and transferred to Tufts MICU 1/18 for further management of respiratory distress requiring BiPAP --> transferred to floor on 1/19 on 6L NC. Underwent right sided thoracentesis complicated by right pneumothorax status post chest tube placement from 1/24-1/29. Patient was also treated for Legionella pneumonia at Tufts. The patient was discharged back to the facility he originated from under police custody, with recommendations of rehab and home O2 2 L/min.

#### Outside Hospital course

OSH ER evaluation revealed blood pressure of 136/60, heart rate of 71, saturating 94% on 4 L nasal cannula. He was tachypneic on exam. Blood work showed CBC of hemoglobin 10.7, BNP elevated to 4300 similar to prior, BMP was done which showed sodium 146 and K of three 2.5. Troponin high-sensitivity were elevated at 63 and 66. VBG showed CO2 retention.

He received lasix 40 IV x2. Continued to have poor urine output with worsening hypoxemia with 02 needs increasing to 10L.

CT chest done showed mild central venous congestion, thickening of the central bronchial walls and diffuse interstitial prominence as above raise the possibility of venous congestion with mild chronic or early pulmonary edema.

Foley catheter was placed. Plavix was held transiently for possible thoracentesis.

Systolic blood pressure had also decreased to mid 80s. Patient started on Neo-Synephrine for blood pressure support. Due to lack of ICU beds, patient was transferred to Heywood ICU.

On my arrival to the ICU patient remains lethargic, easily arousable, oriented to self only. Patient was placed on BIPAP 12/5 at 50% FIO2.

ABG shows 7.39/57/73 on 15 L Oximask

#### **Review of Systems**

Review of Systems: Yes Unobtainable due to mental status

#### PMFSH

Past Medical History

Medical History (Updated 02/28/25 @ 15:38 by Keshav Parthasarathy, MD)

T2DM (type 2 diabetes mellitus)

Health Information Management 0228-00172

Patient name: Orena. Victor Account #: HH0070081237

2

#### Meds

Active Medications: **Current Medications** 

Acetaminophen (Acetaminophen 325 Mg Tablet) 650 mg PO Q4H PRN

PRN Reason: Temperature > 101.1/Headache

Dextrose (Dextrose 10 % 25 Gm/250 MI Iv.Soln) 25 gm IV PROTOCOL PRN

PRN Reason: BG < 54 mg/dL OR Cognitive imp

Dextrose (Dextrose 10 % 25 Gm/250 MI Iv.Soln) 12.5 gm IV PROTOCOL PRN

PRN Reason: BG < 70 mg/dL in NPO Patient

Enoxaparin Sodium (Enoxaparin Sodium 40 Mg/0.4 Ml Syringe) 40 mg SUBCUT DAILY@1630 SCH

Glucose (Glucose Gel 15 Gm Gel..Gram.) 30 gm PO PROTOCOL PRN

PRN Reason: BG < 54 mg/dL OR Cognitive Imp

Glucose (Glucose Gel 15 Gm Gel..Gram.) 15 gm PO PROTOCOL PRN

PRN Reason: BG 54-69 mg/dL

Magnesium Sulfate/Dextrose (Magnesium Sulfate/D5w) 1 gm in 100 mls @ 200 mls/hr IV PROTOCOL

PRN; Protocol

PRN Reason: Electrolyte protocol

Potassium Chloride () 20 meg in 50 mls @ 50 mls/hr IV PROTOCOL PRN; Protocol

PRN Reason: Electrolyte replacement

Calcium Gluconate (Calcium Gluconate) 1 gm in 50 mls @ 50 mls/hr IV PROTOCOL PRN: Protocol

PRN Reason: Electrolyte replacement

Potassium Chloride (Potassium Chloride/H20) 10 meq in 100 mls @ 100 mls/hr IV PROTOCOL PRN;

PRN Reason: Electrolyte Replacement

Noreplnephrine Bitartrate (Levophed) 4 mg in 250 mls @ 0 mls/hr IVCONT .Q0M SCH; Protocol

Albumin Human (Kedbumin 25 %) 100 mls @ 100 mls/hr IV 06H SCH

Stop: 03/01/25 09:14

Cefepime HCl 2 gm/ Sodium (Chloride) 100 mls @ 200 mls/hr IV ONCE ONE; Protocol

Stop: 02/28/25 15:52

Cefepime HCl 2 gm/ Sodium (Chloride) 100 mls @ 33.333 mls/hr IV Q12H SCH; Protocol

Insulin Human Lispro (Insulin Lispro 100 Unit/MI 3 MI Vial) 0 unit SUBCUT BEDTIME SCH; Protocol Insulin Human Lispro (Insulin Lispro 100 Unit/MI 3 MI Vial) 0 unit SUBCUT TIDAC SCH; Protocol

Ondansetron HCl (Ondansetron Hcl 4 Mg/2 Ml Vial) 4 mg IVPUSH Q8H PRN

PRN Reason: Nausea and Vomiting

Pantoprazole Sodium (Pantoprazole Sodium 40 Mg/10 Ml Vial) 40 mg IVPUSH DAILY SCH

Pharmacy Consult (Vancomycin Consult Rx Dosing) 1 each MISCELLANE DAILY PRN; Protocol

PRN Reason: Consult order

Polyethylene Glycol (Polyethylene Glycol 3350 17 Gm Powd, Pack) 17 gm PO DAILY PRN

PRN Reason: Constipation

Potassium Chloride (Potassium Chloride Er 10 Meq Capsule.Er) 0 meq PO PROTOCOL PRN; Protocol

PRN Reason: Electrolyte replacement

Potassium Chloride (Potassium Chloride Packet 20 Meg Packet) 0 meg PO PROTOCOL PRN; Protocol

PRN Reason: Electrolyte replacement

Sodium Chloride (0.9.% Sodium Chloride Flush 10 Ml Syringe) 3 ml IVFLUSH 0830,1630,0000 SCH. ......

#### Physical Exam

Health Information Management 0228-00172

HH

Patient name: Orena, Victor Account #; HH0070081237

Vital Signs:

Vital Signs:

Last Vital Signs

Resp

24 H

02/28/25 15:19

Const:

Other:

Gen-somnolent, wakes up to verbal stimuli, oriented to self, on BiPAP

HEENT-PERRL, supple neck, moderate pallor Cardiovascular-S1, S2 present, paced rhythm

Respiratory-bilateral diminished breath sounds at both bases, bibasilar crackles

present

GI-soft, nontender, nondistended, bowel sounds present

Extremities-1+ edema noted

Skin-no rash seen

Neuro -somnolent, wakes up to verbal stimuli, oriented to self, moving all

extremities

#### Assessment and Plan

(1) Acute encephalopathy:

Status: Acute

(2) Acute on chronic systolic (congestive) heart failure:

Status: Acute

(3) Acute on chronic respiratory failure with hypoxia and hypercapnia:

Status: Acute

(4) T2DM (type 2 diabetes mellitus):

Status: Acute

#### Plan

90 y.o. male with a past medical history of CAD s/p DES to mid LAD (2022), AV block s/p PPM, HFrEF (LVEF 30% 2022), AAA s/p repair in 2019, HTN, HLD, IDDM2, CVA, Alzheimer's dementia, COPD, recent admission for acute hypoxic respiratory failure secondary Legionella pneumonia/right pleural effusion s/p thoracentesis complicated by right pneumothorax presented with increasing shortness of breath

#### Neuro

Acute encephalopathy-metabolic secondary CO2 retention versus septic with underlying dementia Hold centrally acting medications for now. BiPAP. Treat metabolic derangements,

#### Cardiology

Acute on chronic systolic CHF exacerbation with underlying history of CAD/AAA repair/AV block s/p PPM

Shock-cardiogenic shock versus septic shock versus hypovolemia.

Initiate norepinephrine drip to maintain MAP greater than 65 mmHg. Hold diuresis for now.

Albumin 25 g every 6 hours. Low-grade troponin leak noted at OSH.

Hold Entresto and Toprol-XL for now.

Blood cultures pending, initiate broad-spectrum antibiotic therapy.

Health Information Management 0228-00172

3

HH

Patient name: Orena, Victor Account #: HH0070081237

Respiratory

Acute on chronic hypoxic and hypercapnic respiratory failure-multifactorial etiology-pulmonary vascular congestion + pneumonia plus pleural effusion.

Currently on BiPAP 12/5 at 50% FiO2. Alternate with HFNC at 40 L / 40% FiO2.

Check MRSA nares/urine Legionella/strep pneumo antigen.

On empiric vancomycin + cefepime.

Will consider thoracentesis if respiratory status does not improve.

Diuretics on hold secondary to hypotension.

GΙ

History of dysphagia-n.p.o. for now. Speech therapy consult when mental status improves. Protonix for GI prophylaxis

Rena

Decreased urine output secondary to hypotension. Place Foley catheter. Check UA. Renally dose all medications.

Endo

T2DM-most recent A1c was 6.7 on 1/20/2025. Sliding scale insulin for now. Hold metformin.

ĮD

Possible sepsis secondary pneumonia. Blood cultures pending. Started on empiric vancomycin + cefepime.

Enoxaparin for DVT prophylaxis Protonix for GI prophylaxis Full code

overall prognosis remains poor secondary to advanced age, underlying dementia, acute on chronic congestive heart failure/acute on chronic hypoxic respiratory failure

Total time managing care of this patient today: 55 minutes.

Dictated By:

Keshav Parthasarathy MD

Signed By:

<Electronically signed by Keshav Parthasarathy MD>

02/28/25 1544

DD/DT: 02/28/25 1526

TD/TT: 02/28/25 1526

Transcriptionist:

Health Information Management 0228-00172

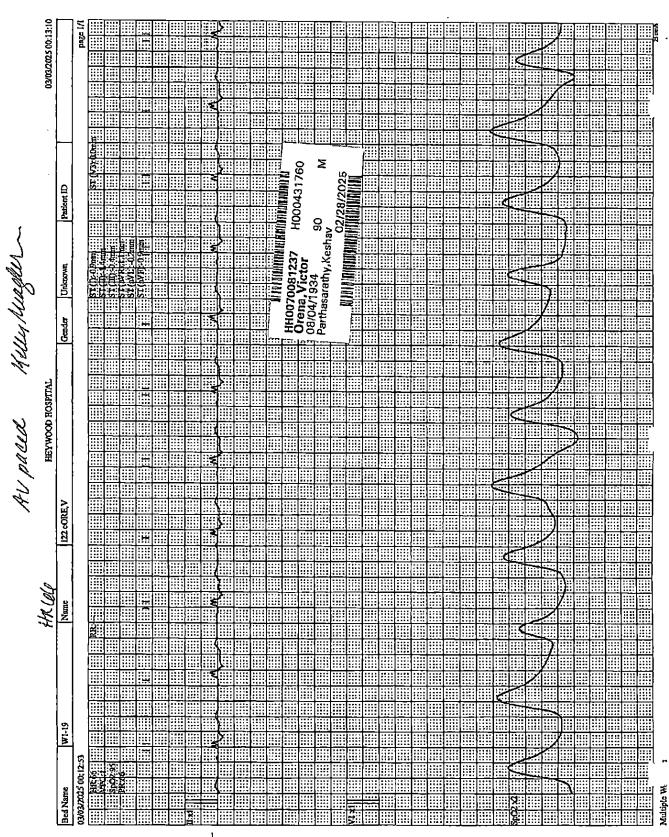
# Bureau of Prisons Health Services Cosign/Review

 Inmate Name:
 ORENA, VICTOR
 Reg #: 07540-085

 Date of Birth:
 08/04/1934
 Sex: M
 Race: WHITE

 Scanned Date:
 03/07/2025 13:29 EST
 Facility: DEV

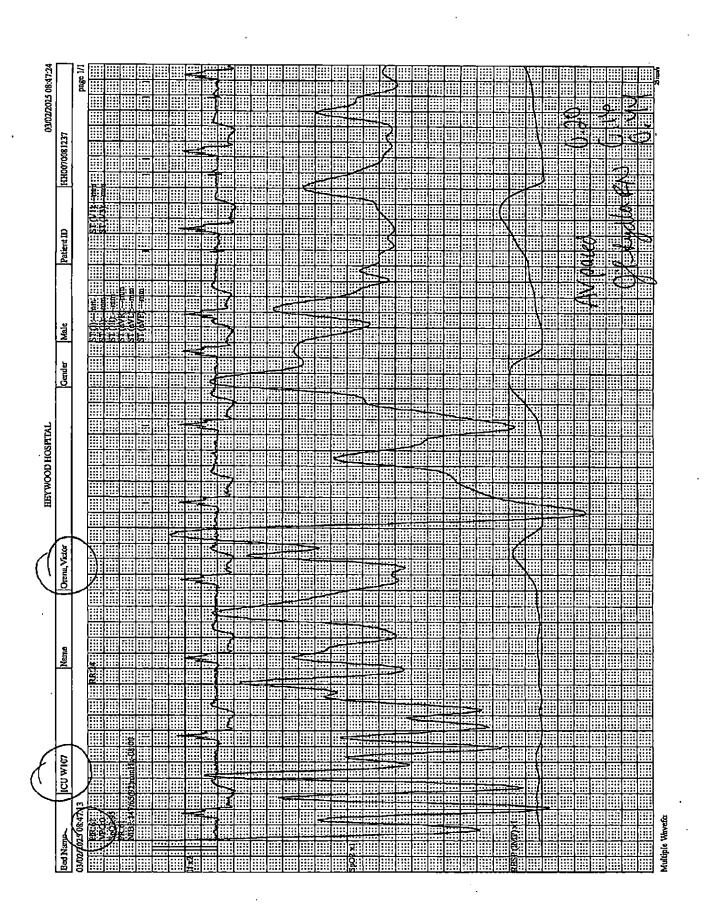
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Expanded Wave

# Bureau of Prisons Health Services Cosign/Review

 Inmate Name:
 ORENA, VICTOR
 Reg #: 07540-085

 Date of Birth:
 08/04/1934
 Sex: M
 Race: WHITE

 Scanned Date:
 03/07/2025 13:27 EST
 Facility: DEV

Cosigned by Churchville, Lawrence MD on 03/10/2025 11:40.

Heywood Hospitai 242 Green St. Gardner, MA 01440 07540-085

XRay Report Signed

Patient: Orena, Victor DOB: 08/04/1934 Age/Sex: 90 / M

Loc: HE.ICU W107-1

Attending Dr. Keshav Parthasarathy MD

MR#: H000431760 Acct:HH0070081237 ADM Date: 02/28/25

Ordering Physician: Keshav Parthasarathy MD

Date of Service: 02/28/25 Procedure(s): XR chest 1V

Accession Number(s): A0000423659HH

cc: Ryan Chua~

Procedure: XR chest 1V 2/28/2025 3:00 PM

Indications: resp fallure.
Comparison: None

Technique: AP view of the chest,

## Findings:

LINES/TUBES: Right chest wall pacemaker and abandoned left chest wall leads.

LUNGS/AIRWAYS: Hypoinflated lungs with central vascular congestion, increased interstitial lung markings, and small bilateral pleural effusions.

HEART/MEDIASTINUM: Cardiomegaly. SKELETAL: No acute skeletal abnormality.

OTHER: None.

Electronically Signed in PowerScribe By Andrew Reynolds, MD

ORDER #: 0228-0132 XR/XR chest 1V

IMPRESSION:

- 1. Pulmonary edema.
- 2. Abandoned pacemaker leads within the left chest wall and a pacemaker battery pack and leads in the right chest wall.

Dictated By:

Andrew Reynolds MD

Signed By:

03/01/25 1036

DD/DT: 02/28/25 1500

TD/TT: 02/28/25 1520

Transcriptionist: AR

Imaging 0301-00052

# Bureau of Prisons Health Services Cosign/Review

 Inmate Name:
 ORENA, VICTOR
 Reg #:
 07540-085

 Date of Birth:
 08/04/1934
 Sex:
 M
 Race:
 WHITE

 Scanned Date:
 03/07/2025 13:24 EST
 Facility:
 DEV

Cosigned by Churchville, Lawrence MD on 03/10/2025 11:40.

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PAGE 1	34 Disch: 03/03/25		Units	77777777777777777777777777777777777777
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Heywood \*Live\* - LAB Sunmary Discharge Report for LIS ELR

PAGE 2

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Heywood \*Live\* - LAB Sunmery Discharge Report for LIS ELR

PAGE 3

Disch: 03/03/25 Age-Sex: 90.H DOB: 08/04/1934 Attend Dr: Edna A McAddy MD Location: HE.Ul V122-1 Dis \*\*\* Chemistry (Continued) \*\*\* H000431760 DIS IN Name: Orena, Victor Acctf: HH0070081237 Unitf: Reg: 02/28/25 Status:

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Reference

1634

-03/02/25-

2116

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Date Time

GFR Value: mL/min/1.73 square neters Calculation: CKO-EPI Creatinine Equation (2021) 74(B) 6 eGFR

Chronic Kidney Disease is defined as either of the following present for > 3 months:

- GFR less than 60 mL/min/1.73 square meters. - Microalbumin:Ur, Creatinine Ratio >= 30 mg/g or other markers of kidney damage

Kidney failure is less than 15 mL/min/1.73 square meters

This test is not performed in patients under the age of 18.

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RUN DATE: 03/06/25 RUN TIME: 0003

PAGE 4

Heywood \*Live\* - LAB Sunnary Discharge Report for LIS ELR

Disch: 03/03/25 Units Name: Orema, Victor
Acctf: HH0070081237 Unitf: H000431760 Attend Dr: Edna A McAddy MD
Reg: 02/28/25 Status: DIS IN Location: HE.U1 U122-1 Dis Chronic Kidney Disease is defined as either of the following present for >= 3 months: Reference GFR Value: nL/min/1..73 square meters Calculation: CKD-EFI Creatinine Equation (2021) \*\*\* Chemistry (Continued) \*\*\* 67(C) 5050 --03/02/25---0812 1114 Θ Date Time eGFR

GFR less than 60 mL/min/1.73 square meters.
 Microalbumin:Ur. Greatining Ratio >= 30 mg/g or other markers of kidney damage

This test is not performed in patients under the age of 18. Kidney failure is less than 15 mL/min/1,73 square meters

	•
IP/66 IP/66 IP/66 IP/66 IP/66 IP/66 IP/66 IP/66 IP/66 IP/66 IP/66 IP/66	Units
(75-121) (75-121) (8-2-9-6) (2-5-4-5) (1.7-2-3) (1.7-2-3) (1.2-1-2) (5-40) (5-41) (6-41) (6-41) (3-5-5-2) (7-1-2-5) (1.1-2-5)	Reference
2 20 2 20 3 3 6 1 1 1 3 3 1 1 1 1 1 1 1 1 1 1 1 1	1129
06	03/01/25 1622
5 8	1924
Glucose Glu Bedside CA Phos MG Total Bili AST Alt Alt Alb Globulin A G Ratio	Date Time

200			03/01/25			
Time			2090		Reference	Units
N.A.	_			146	H	
×				3.8	(3.5-5.1)	T/long
당	_			105	_	
C05	_			31	Ħ	
Anion Gap	_			_	(10-20)	
BON	_	_		18	_	
Creat	_	_		1.09	_	

Tb/pm .

(75-121)

96

32

88

Glu Bedside

PAGE 5 .

Heywood \*Live\* - LAB Sunmary Discharge Report for LIS ELR

Hane:	Mane: Orena, Victor	· B		Age/Sex: 90/H	H/06	BOB	DOB: 08/04/1934	
Acct#:	Acct#: HH0070081237 Unit#: H000431760	7 Unit#:	H000431760	Attend Dr:	Edne A	Attend Dr: Edne A McAddy MD		
Reg:	Reg: 02/28/25 Status: DIS IN	Status:	NI SIQ	Location: HE.V1	HE VI	W122-1	Disch:	Disch: 03/03/25
			*** Chem	*** Chemistry (Continued) ***	inucd)	**		

Units Ref erence 84(D) 0544 --03/01/25--0607 9580 ê Date Time eGFR

GFR Value: mL/min/1.73 square meters Calculation: CKD-EFI Creatinine Equation (2021)

Chronic Kidney Disease is defined as either of the following present for  $\rangle^*$  3 months:

- GFR less than 60 mL/min/1.73 square meters. - Microalbumin:Ur. Creatinine Ratio >= 30 mg/g or other markers of kidney denage

Kidney failure is less than 15 mL/min/1.73 square meters

This test is not performed in patients under the age of 18.

mg/dI	mg/dI	IB/GI	Ib/gi	, , , ,	De/Je/
(75-121) (75-121)	(8.2–9.6)	(1,7-2,3)	(0.2-1.2)	(5-41)	H (3P-300)
84	8.8	2,00	6.0	9 (	4561.U(E)
90					
- 66					
					-
Glucose Glu Bedside	្ស	FDOS	Total Bili	Alt	Frohie

(E) Age-based positive cut points

үде	Age Group	Cut-Points (pg/nl)	Cut-Points Interpretation (pg/nl)
<b>20</b>	<50 years	450	>450 pg/nl indicates ADHF is likely
50-7	50-75 years	900	>900 pg/nl indicates ADEF is likely
×75	>75 years	1800	>1800 pg/ml indicates ADHF is likely
A11	ages	Results	Indeterminate. Further clinical
		vithin	information is needed to determine
		gray zone	if ADHF is present.
		for age group	9

Negative cut-point for all ages

Age Group Cut-Point Interpretation (pg/nl)

97.4 97.41 97.41 <300 pg/mL indicates ADHF is not likely</pre> L | (6.4-8.3) | (3.5-5.2) | (2.0-3.5) 300 All ages TP Alb Globulin

Heywood «Live» - IAB Summary Discharge Report for LIS EIR

PAGE 6

Name: Orena, Vi Acct#: HK007008 Reg: 02/28/25	1237	Unit#: Status:	HODO431760 DIS IN	•	Age/Ser: Attend Dr: Location:	90/M Edna A HE.W1	DOB: McAddy MD W122-1	08/04/1934 Disch:	: 03/03/25
	,	1	*	Chemist	*** Chemistry (Continued)		***		
Date Time		9580	0	-03/01/25 0607		0544	Reference	Units	
1/ G Ratio	  - <b>-</b>			·		39	(1.1-2.5) L   (40-129)	770	
Date Time	0	03/01/25		1758	02/28/25-	1541	Reference	Units	
Slu Bedside	_	95	_	116	_	109	(75–121)	Tb/bu	
Date	<del> </del>	02/28/25 1535					Reference	Units	
4A C. C.		145 3.6 102 34 .12 1,32 51(F)	<u></u>				(136-145)   (3.5-5.1)   (98-107)   (22-29)   (10-20)   (8-23)   (0.67-1.17)	mnol/I mnol/I mnol/I mnol/I mnol/I mg/dl	
(F)	GFR Value: Calculation:	GFR Value:  culation:	MI/min/1.73 square CKD-EPI Creatinine	73 square Creatinine	ire meters ine Equation		(2021)		
	Chronic present	c Kidney t for >=	Chronic Kidney Disease is defined present for >= 3 months;	is defi	φ W	either of	if the following	li di	
	I G	GFR less Microalbu rkers of	than 60 min:Ur. kidney d	L/min/j reatini mege		76 act	rs. ng/g or other		
	Kidney	failure	Kidnoy failure is loss than 15 mL/min/1.73 square	then 15	mL/min/	1.73 Տգ	uare meters		-
	This te	test is n	not perfor	med in	performed in patients under the	ander s	the age of 18		
Slucose  2.4  2.5  Cotal Billi  MIT  Ill  RP  LIB  Slobulin  A G Ratio  Alk Phos		112 8.8 0.6 0.6 118 10 3.6 3.6 5.5 5.5					(75-121) (8.2-9.6) (1.7-2.3) (0.2-1.2) (5-40) (5-41) (6.4-1) (6.4-1) (1.2-3.5) (1.2-3.5) (1.2-3.5) (1.2-3.5)	TP/6	

Haywood \*Live\* - LAB Summary Discharge Report for LIS ELR

PAGE 7

				_							_	•		
	03/03/25													
1934	Disch:	Units	ng/mT						Units					
A McAd	nued) ***		(0-0.15)	. bacterial infection	ncouraged. Bacterial	Antibiotic therapy strongly encouraged, the presence of becterial infection	>2.0 - Antibiotic therapy strongly encouraged. suggestive of the presence of hacterial infection. ** On 1st day of ICU admission is associated with a high risk for progression to severe sepais and/or septic shock.	logy ***	Reference	(Negative)	Megative See also (I)  L. pneumophila serogroup I antigen in urine suggesting no current or past infection. Infection due to Legionella cannot be ruled out since other serogroups and species may cause disease, antigen may not be present in the urine in early infection and the level of antigen present in the urine in urine specimen may be below the detection limit of the test.	(Negative)	nurine suggesting no lue to S. pneumoniae nay be below the	
	IN LOCATION: HE.VI		_	7 discouraged	- Antibiotic therapy encouraged.	herapy stron • of bacteria	Antibiotic therapy strongly encouraged. seence of hacterial infection. ** On 1st on is associated with a high risk for p sepais and/or septic shock.	*** Immunology/Serology ***		-	ve (I) sunophila serogroup I antigen in urine suggest the or past infection. Infection due to Legion the ruled out since other serogroups and spectisesse, antigen hay not be present in the un infection and the level of antigen present is specimen hay be below the detection limit of	-	ussococcal preumoniae in urine infection. Infection due to out since the antigen may be of the test.	
H000431760	SIG		_	ictic therapy	ng/ml - Antibiot possible	Antibiotic (	Antibiotic therapy strongly searce of bacterial infection is associated with a hig sepais and/or septic shock.	THE THE		<u>-</u>	s serogroup 1 est infection.  ed out since of antigen may in and the leve a may be below	_	neumococcal pn st infection sd out since th it of the test.	
Orena, Victor HH0070081237 Unit#:	/25 Status;	02/28/25 1535	n   0.09(G)	<0.25 - antibiotic therapy discouraged. bacterial unlikely	0.26-0.50 ng/ml infection possib	>0.50 ng/nl - suggestive of	>2.0 - Antibiotic therapy the presence of bacterial edhission is associated vi severe sepsis and/or septi		02/28/25 1415	(H) (H)	Megative See also (I) I. pneumophila s current or past cannot he ruled cause disease, early infection urine specimen n	UR ( (J)	Megative See also (K) Megative for pnsumcoccal pnsumentae in urine current or past infection. Infection due to 9 cannot be ruled out since the antigen may be be detection limit of the test.	
	Reg: UZ/28.	Date Time	Procelcitonin	(9)					Date Time	Ur Legion pneum!	(H) (I)	S. Pneum AG (	(3) (X)	

RUN DATE: 03/06/25 RUN TIME: 0003

PAGE 8

Heywood \*Live\* - IAB Sunnary Discharge Report for LIS ELR

Disch: 03/03/25 mg/d1 mg/d1 Units Units Age/Sex: 90/M DOB: 08/04/1934 Attend Dr: Edna A HoAddy MD Location: HE.W1 V122-1 Dis (Clear) (1.001-1.035) (Negative) (Negative) (Negative) (Negative) (S.0-8.0) (Negative) [ (97.0-100.0) (0.2-1.0) (Negative) (Negative) (0-3/hpf) (0-2/hpf) (None seen) (0-1/lpf) (7.35-7.45)Reference Ref erence (Yellov) ese Urinalysis ese \*\*\* Blood Gas \*\*\* Name: Orena, Viotor Acat#: HH0070081237 Unit#: H000431760 Reg: 02/28/25 Status: DIS IN (M) POSITIVE BLOOD FLOW m ~ 02/28/25 1547 02/28/25 1541 0.2 Negative Trace 25-30 0-4 Rare 2-5/LPF 98.6 0313 (M) Yellov Clear 1.025 Negative Negative 100 7.39 56.7 73 Ê (H) RIGHT RADIAL (I) Trace (low) SITE COLLECTED | Ur Uro Ur Nitrite Ur Ieu Esterase Ur BBC Ur Bact Ur Hatine Cst PATIENT TEMP. | TIME PERFORMED ALIEN'S TEST Ur Color
Ur Appear
Ur Glu UA
Ur Glu UA
Ur Bilirubin
Ur Keto
Ur pH
Ur pH FIO2
ABG PH
ABG PCO2
ABG RCO3
ABG RCO3
ABG TCO2
ABG BE
ABG O2 Sat Date Time Date

\*\* CONTINUED ON NEXT PAGE \*\*

nnHg nnHg nnol I nnol I

(35-48) (83-108) (18-23) (22-29) (-2-3) (95-98)

**HHHHH**H

34.6 36 94.8

RUN DATE: 03/06/25 RUN TIME: 0003

Heywood'\*Live\* - IAB Sunmery Discharge Report for LIS ELR

PAGE 9

Name: Orena, Victor Acctf: HH0070081237 Unitf: H000431760 Reg: 02/28/25 Status: DIS IN

Age-Sex: 90/H DOB: 08/04/1934 Attend Dr: Edne A McAddy MD Location: HE.01 U122-1 Dis

\*\*\* Microbiology \*\*\*

Blood Culture

Collection Date: 02/28/25

Final 03/05/25

No growth aerobic or anserobic bottles after 5 days incubation.

Final 03/05/25 No growth aerobic or anaerobic bottles after 5 days incubation.

Blood Culture

MRSA Culture

Final 03/02/25 NO MRSA DETECTED

Disch: 03/03/25

\*\* END OF REPORT \*\*

# Bureau of Prisons Health Services Cosign/Review

 Inmate Name:
 ORENA, VICTOR
 Reg #: 07540-085

 Date of Birth:
 08/04/1934
 Sex: M
 Race: WHITE

 Scanned Date:
 03/07/2025 13:23 EST
 Facility: DEV

Cosigned by Churchville, Lawrence MD on 03/10/2025 11:40.

Page: 06 of 19

2025-03-07 10:03:40 EST

18582441606

From: 8582441606

**Tufts**Medicine Tufts Medical Center

Tufts Medical Center Health Information

Management

800 Washington Street Boston MA 02111-1552 Orena, Victor

MRN: 34605960, DOB: 8/4/1934, Legal Sex: M

Adm: 1/18/2025, D/C: 1/30/2025

# 01/18/2025 - Admission (Discharged) in Tufts Medical Center Medical Surgical Unit

Type and screen [205543725] (Final result)

Electronically signed by: Xia Wu, MD on 01/23/25 1645

Ordering user: Xia Wu, MD 01/23/25 1645

Authorized by: Kathleen Finn, MD Frequency: Routine q72h 01/24/25 0500 - Until Specified

Quantity: 1

Instance released by: Xia Wu, MD (auto-released) 1/30/2025 4:00 AM

Status: Completed

Status: Completed

Class: Lab Collect

Lab status: Final result

Ordering mode: Standard

Ordering provider: Xia Wu, MD

Specimen Information

Туре Draw Type Source Collected By TB25-030-B021 Blood Blood, Venous Venipuncture Darilyn Peguero 01/30/25 0645

Type and screen [205543725]

Ordering provider: Xia Wu, MD 01/30/25 0400 Filed by: Interface, Clinical Lab Results In 01/30/25 0812

Resulting lab: TUFTS BLOOD BANK

Resulted: 01/30/25 0812, Result status: Final result

Order status: Completed Collected by: Darilyn Peguero 01/30/25 0645

Components

Component	. Value	< Referen	ce Range / Flag	Lab
ABORh	O NEG		_	TMC BB
Antibody Screen	NEG	NEG	<del>_</del>	TMC BB
Specimen Expiration Date	02/02/2025 23:59		_	TMC BB

**Testing Performed By** 

Lab - Abbreviation	n: Name	Director	Address	Valid Date Range
58 - TMC BB	TUFTS BLOOD BANK	J. Ryan Peña, MD, PhD. MS	800 Washington St Boston MA 02111	06/14/24 0752 - Present

Body fluid cell count with differential [205044799] (Final result)

Electronically signed by: Carl Tanba, MD on 01/28/25 1046

Ordering user: Carl Tanba, MD 01/28/25 1046

Authorized by: Rameesha Mehreen, MD Frequency: Routine Once 01/28/25 1047 - 1 occurrence

Quantity: 1

Ordering provider: Carl Tanba, MD

Order status: Completed

CLIA number: 22D0074723

Collected by: Michelle Curtiss, RN 01/28/25 1210

Ordering mode: Standard Class: Lab Collect

Lab status: Final result

Instance released by: Carl Tanba, MD (auto-released) 1/28/2025 10:46 AM

Specimen Information

Charles and an artist of the second s			
	aloga <u>n</u> a an airthean an leach		
10	Type	Source	Collected By
a. The second control of the second control		TO MEN CONTROL OF THE PARTY OF	Collected By
TM25-028-	Body Fluid	Diagral Cavity	04/00/05 4040
119120-020-	Body Maid	Pleural Cavity,	01/28/25 1210
HE0510	·	Right	
MEUDIU		Right	

#### Body fluid cell count with differential [205044799]

Body fluid cell count with differential [205044805] (Abnormal)

Resulted: 01/28/25 1412, Result status: Final result

Ordering provider: Carl Tanba, MD 01/28/25 1046 Filed by: Lab, Background User 01/28/25 1412

Resulting lab: TUFTS MAIN LAB

Narrative:

Reference Ranges

Peritoneal:

**RBC**: Not Established WBC/TNCC: < 500 cells/uL Neutrophils: < 25%

All other body fluid types:

Printed on 3/7/25 9:55 AM

Page: 07 of 19

2025-03-07 10:03:40 EST

18582441606

From: 8582441606

**Tufts**Medicine **Tufts Medical Center** 

Tufts Medical Center Health Information

Management

800 Washington Street Boston MA 02111-1552 Orena, Victor

MRN: 34605960, DOB: 8/4/1934, Legal Sex: M

Resulted: 01/28/25 1412, Result status: Final result

Adm: 1/18/2025, D/C: 1/30/2025

# 01/18/2025 - Admission (Discharged) in Tufts Medical Center Medical Surgical Unit (continued)

#### Labs (continued)

The reference range is not established for this test. The test result should be integrated into the clinical context for interpretation.

Components

Component	NAME OF THE PROPERTY OF	Reference		2000
			Flag	Lab
Color, BF	Yellow	Straw, Colorless,	A !	TMC
		Other - See		
		Comment	······································	
Appearance, Fluid	Cloudy	Clear	A-1	TMC
RBC, BF	3,000	cells/uL		TMC
TNC, Body Fluid	5,101	cells/uL	_	TMC
Neutrophil %, Body Fluid	13	%	_	TMC
Lymphocytes %, Body Fluid	64	%	_	TMC
Mono/Macrophage Cells %, Body Fluid	5	%	_	TMC
Eosinophils %, Body Fluid	15	%		TMC
Basophils %, Body Fluid	1	%	_	TMC
Atypical Lymphocytes %, Body Fluid	1	%	_	TMC
Mesothelial %, Body Fluid	1	%	_	TMC
Total Cells Counted, Body Fluid	100		_	TMC

**Testing Performed By** 

Lab - Abbreviatio	n Name	Director	Address	Valid Date Range
18 - TMC	TUFTS MAIN LAB	J. Ryan Peña, MD,	800 Washington Street	06/10/24 1020 - Present
		PhD. MS	Boston MA 02111	

Order status: Completed

CLIA number: 22D0074723

Collected by: Michelle Curtiss, RN 01/28/25 1210

## Body fluid cell count with differential [205044799]

Body fluid cell count with differential [205044805] (Abnormal)

Ordering provider: Carl Tanba, MD 01/28/25 1046 Filed by: Lab, Background User 01/28/25 1412

Resulting lab: TUFTS MAIN LAB

Narrative:

Reference Ranges

Peritoneal:

**RBC: Not Established** WBC/TNCC: < 500 cells/uL

Neutrophils: < 25%

All other body fluid types:

The reference range is not established for this test. The test result should be integrated into the clinical context for interpretation.

Components

Components				
Component	Value	Reference Range	Flag	Lab
Color, BF	Yellow	Straw, Colorless, Other - See Comment		TMC
Appearance, Fluid	Cloudy	Clear	Α:	TMC
RBC, BF	3,000	cells/uL		TMC
TNC, Body Fluid	5,101	cells/uL		TMC
Neutrophil %, Body Fluid	13	%		TMC
Lymphocytes %, Body Fluid	64	%		TMC

Received 3/7/2025 10:25:20 AM [Eastern Standard Time] SCH67CAC99E6458

Page: 08 of 19

2025-03-07 10:03:40 EST

18582441606

From: 8582441606

Status: Completed

Tufts Medicine
Tufts Medical Center

Tufts Medical Center Health Information

Management

800 Washington Street Boston MA 02111-1552 Orena, Victor

MRN: 34605960, DOB: 8/4/1934, Legal Sex: M

Adm: 1/18/2025, D/C: 1/30/2025

# 01/18/2025 - Admission (Discharged) in Tufts Medical Center Medical Surgical Unit (continued)

Labs (continued)

Mono/Macrophage Cells %, Body Fluid	5	. %		TMC	
Eosinophils %, Body Fluid	15	%	<u> </u>	TMC	
Basophils %, Body Fluid	1	%		TMC	
Atypical Lymphocytes %, Body Fluid	1	%		TMC	
Mesothelial %, Body Fluid	1	%		TMC	
Total Cells Counted, Body Fluid	100	_		TMC	

**Testing Performed By** 

Lab - Abbreviatio	n Name	Director	Address	Valid Date:Range:
18 - TMC	TUFTS MAIN LAB	J. Ryan Peña, MD, PhD, MS	800 Washington Street Boston MA 02111	06/10/24 1020 - Present

Body fluid culture [205044800] (Final result)

Electronically signed by: Carl Tanba, MD on 01/28/25 1046

Ordering user: Carl Tanba, MD 01/28/25 1046

Authorized by: Rameesha Mehreen, MD Frequency: Routine Once 01/28/25 1047 - 1 occurrence

Prequency: Routine Once 01/28/25 1047 - 1 occur

Quantity: 1

Ordering provider: Carl Tanba, MD

Ordering mode: Standard Class: Unit Collect

Lab status: Final result

Instance released by: Carl Tanba, MD (auto-released) 1/28/2025 10:46 AM

Specimen Information

\$5,556,632(59),190(50)\$0,000,000,000,000,000			Source	Collected By
TM25-028-	Body Fluid	Non-blood	Pleural Cavity,	Michelle Curtiss, RN 01/28/25
HE0510		Collection	Right	1210

# Body fluid culture [205044800]

Order status: Completed

Ordering provider: Carl Tanba, MD 01/28/25 1046 Filed by: Kristina Bento, MT 02/02/25 1002

Collected by: Michelle Curtiss, RN 01/28/25 1210

Resulting lab: TUFTS MAIN LAB

CLIA number: 22D0074723

Acknowledged by: Rameesha Mehreen, MD on 02/05/25 1126

Components

Components	The second secon	and the second of the second o	
Component	Value	Reference Range Flag	Lab-
Culture		_	TMC
Gram Stain Result	3+ Polymorphon uclear leukocytes		TMC
Gram Stain Result	No squamous epithelials cells	<u> </u>	TMC
Gram Stain Result	No organisms seen	<del></del>	TMC

**Testing Performed By** 

	n Name	Director	Address	Valid Date Range
18 - TMC	TUFTS MAIN LAB	J. Ryan Peña, MD, PhD, MS	800 Washington Street Boston MA 02111	06/10/24 1020 - Present

Resulted: 02/01/25 0744, Result status: Preliminary

Resulted: 02/02/25 1002, Result status: Final result

Body fluid culture [205044800]

result Page 3 Page: 09 of 19

2025-03-07 10:03:40 EST

18582441606

From: 8582441606

Tufts Medical Center

Tufts Medical Center Health Information

Management

800 Washington Street Boston MA 02111-1552 Orena, Victor

MRN: 34605960, DOB: 8/4/1934, Legal Sex: M

Adm: 1/18/2025, D/C: 1/30/2025

# 01/18/2025 - Admission (Discharged) in Tufts Medical Center Medical Surgical Unit (continued)

# Labs (continued)

Ordering provider: Carl Tanba, MD 01/28/25 1046

Filed by: Kristina Bento, MT 02/01/25 0744

Resulting lab: TUFTS MAIN LAB

Order status: Completed

Collected by: Michelle Curtiss, RN 01/28/25 1210

CLIA number: 22D0074723

Components

Component	Value	Reference	Range Flag	Lab
Culture	No growth to date	_	_	TMC
Gram Stain Result	3+ Polymorphon uclear leukocytes	-	<del>_</del>	TMC .
Gram Stain Result	No squamous epithelials cells		_	тмс
Gram Stain Result	No organisms seen		<u>—</u>	TMC

## Reviewed by

Rameesha Mehreen, MD on 02/05/25 1126 Rameesha Mehreen, MD on 01/30/25 1434 Rameesha Mehreen, MD on 01/29/25 0952

## **Testing Performed By**

Lab - Abbrevlation	n Name	Director	Address	Valid Date Range
18 - TMC	TUFTS MAIN LAB	J. Ryan Peña, MD, PhD. MS	800 Washington Street Boston MA 02111	06/10/24 1020 - Present

#### Body fluid culture [205044800]

Ordering provider: Carl Tanba, MD 01/28/25 1046

Filed by: Faith Anderson 01/30/25 0913

Resulting lab: TUFTS MAIN LAB

Acknowledged by: Rameesha Mehreen, MD on 01/30/25 1434

Order status: Completed

Collected by: Michelle Curtiss, RN 01/28/25 1210

Resulted: 01/30/25 0913, Result status: Preliminary

CLIA number: 22D0074723

#### Components

Component	Value	Reference Range	Flag	Lab
Culture	No growth to date	_	_	TMC
Gram Stain Result	3+ Polymorphon uclear leukocytes			ТМС
Gram Stain Result	No squamous epithelials cells			ТМС
Gram Stain Result	No organisms seen	_	_	TMC

# **Testing Performed By**

Lab - Abbreviation Name Director Address Valid Date Range

result

Page: 10 of 19

2025-03-07 10:03:40 EST

18582441606

From: 8582441606

Tufts Medicine
Tufts Medical Center

Tufts Medical Center Health Information

Management

800 Washington Street Boston MA 02111-1552 Orena, Victor

MRN: 34605960, DOB: 8/4/1934, Legal Sex: M

Adm: 1/18/2025, D/C: 1/30/2025

01/18/2025 - Admission (Discharged) in Tufts Medical Center Medical Surgical Unit (continued)

Labs (continued)

18 - TMC

TUFTS MAIN LAB

J. Ryan Peña, MD, PhD. MS 800 Washington Street

06/10/24 1020 - Present

Boston MA 02111

Resulted: 01/29/25 0918, Result status: Preliminary

Body fluid culture [205044800]

Ordering provider: Carl Tanba, MD 01/28/25 1046

Filed by: Faith Anderson 01/29/25 0918

Resulting lab: TUFTS MAIN LAB

Acknowledged by: Rameesha Mehreen, MD on 01/29/25 0952

Order status: Completed

Collected by: Michelle Curtiss, RN 01/28/25 1210

CLIA number: 22D0074723

Components

Component	Value	Reference	e Range Flag	Lab	
Culture	No growth to date	_	. —	TMC	
Gram Stain Result	3+ Polymorphon uclear leukocytes			, TMC	
Gram Stain Result	No squamous epithelials cells	_		TMC	
Gram Stain Result	No organisms seen			TMC	Alle der Frederick ter Welder Bake

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
18 - TMC	TUFTS MAIN LAB	J. Ryan Peña, MD, PhD, MS	800 Washington Street Boston MA 02111	06/10/24 1020 - Present

Resulted: 01/28/25 1308, Result status: Preliminary

Body fluid culture [205044800]

Ordering provider: Carl Tanba, MD 01/28/25 1046 Filed by: Rasheeda Cutts, MT 01/28/25 1308

Resulting lab: TUFTS MAIN LAB

Order status: Completed

Collected by: Michelle Curtiss, RN 01/28/25 1210

CLIA number: 22D0074723

Components

Component	Value	Reference	Range Flag	Lab
Gram Stain Result	3+	_	<del>_</del>	TMC
	Polymorphon			
	uclear			
	leukocytes	·		
Gram Stain Result	No	_	_	TMC
	squamous		•	
	epithelials			
	cells			
Gram Stain Result	No ·	_	_	TMC
	organisms			
	seen			

## Reviewed by

Rameesha Mehreen, MD on 02/05/25 1126 Rameesha Mehreen, MD on 01/30/25 1434 Rameesha Mehreen, MD on 01/29/25 0952

Page: 11 of 19

2025-03-07 10:03:40 EST

18582441606

From: 8582441606

Tufts Medicine
Tufts Medical Center

Tufts Medical Center Health Information

Management

800 Washington Street Boston MA 02111-1552 Orena, Victor

MRN: 34605960, DOB: 8/4/1934, Legal Sex: M

Adm: 1/18/2025, D/C: 1/30/2025

# 01/18/2025 - Admission (Discharged) in Tufts Medical Center Medical Surgical Unit (continued)

Labs (continued)

Testing Performed By

Lab - Abbreviatio	n Name	Director	Address	Valid Date Range
18 - TMC	TUFTS MAIN LAB	J. Ryan Peña, MD,	800 Washington Street	06/10/24 1020 - Present
		DhD Mg	Rocton MA 02111	

## **All Reviewers List**

Rameesha Mehreen, MD on 2/5/2025 11:26 Rameesha Mehreen, MD on 1/30/2025 14:34 Rameesha Mehreen, MD on 1/29/2025 09:52

#### Non-gynecologic cytology [205044801] (Final result)

Electronically signed by: Carl Tanba, MD on 01/28/25 1046

Ordering user: Carl Tanba, MD 01/28/25 1046

Authorized by: Rameesha Mehreen, MD Frequency: Routine Once 01/28/25 1047 - 1 occurrence

Prequency: Routine Once 01/28/25 1047 - 1 occurrence Quantity: 1

Instance released by: Carl Tanba, MD (auto-released) 1/28/2025 10:46 AM

Status: Completed

Ordering provider: Carl Tanba, MD
Ordering mode: Standard

Class: Unit Collect Lab status: Final result

### Questionnaire

Question	Answer
Number of specimens:	1
Source of specimen(s):	Pleural Cavity, Right

Lab Result Document - Document on 1/30/2025 4:56 PM (below)

Page: 12 of 19

2025-03-07 10:03:40 EST

18582441606

From: 8582441606

Tufts Medical Center

Tufts Medical Center Health Information

Management

800 Washington Street Boston MA 02111-1552 Orena, Victor

MRN: 34605960, DOB: 8/4/1934, Legal Sex: M

Adm: 1/18/2025, D/C: 1/30/2025

01/18/2025 - Admission (Discharged) in Tufts Medical Center Medical Surgical Unit (continued)

Labs (continued)

# **Tuffs**Medicine

Tufts AP CLIA: 22D0074723

TUFTS ANATOMIC PATHOLOGY LAB, 800 Washington

617-636-5829

Street, Boston MA 02111

Director: J. Ryan Peña, MD, PhD, MS

Orena, Victor MRN: 34605960 Male, 90 yrs, 8/4/1934 508-793-1202

Non-Gynecologic Cytology (Final result)

TC25-00178

Authorizing Provider: Ordering Location: Rameesha Mehreen, MD Tufts Medical Center Medical Ordering Provider; Collected: Carl Tanba, MD 01/28/2025 1210

Surgical Unit Yinan Hua, MD

01/29/2025 0807

Pathologist: Specimens

Pleural Cavity, Right

Final Diagnosis

A. Pleural Cavity, Right, Fluid:

Adequacy:

Satisfactory for evaluation

Interpretation:

ATYPICAL CELLS PRESENT

Note: There are numerous small lymphocyte in this fluid specimen, some of them are slightly bigger, which might represent a reactive process. If the pleural effusion persists and clinically indicated, a flow cytometry analysis should be considered.

Electronically signed by Yinan Hua, MD on 1/30/2025 at 1656

## **Gross Description**

A. Received, labeled with the patient's name, "Orena, Victor" and medical record number, is 2.5cc hazy yellow tinged fresh fluid. Fluid is concentrated and one fixed Pap stained ThinPrep slide is prepared. Entire volume is concentrated but specimen is not suitable for cell block.

Grossed by BRAY, CHANELLE on 1/29/25 at 8:07 AM.

**Proposed Charges** 

***************************************			
ID .	Protocol or Tasks	Charge Code	Qty
A	Body Fluids	LAB88112	1

TC25-00178

Page: 1 of 2

Printed: 1/30/2025 4:56 PM

<sup>-</sup> Numerous small lymphocytes and rare mesothelial cells, see note.

Page: 13 of 19

2025-03-07 10:03:40 EST

18582441606

From: 8582441606

**Tufts**Medicine Tufts Medical Center Tufts Medical Center Health Information

Management

800 Washington Street Boston MA 02111-1552 Orena, Victor

MRN: 34605960, DOB: 8/4/1934, Legal Sex: M

Adm: 1/18/2025, D/C: 1/30/2025

01/18/2025 - Admission (Discharged) in Tufts Medical Center Medical Surgical Unit (continued)

Labs (continued)

# **Tufts**Medicine

Tufts AP CLIA: 22D0074723

TUFTS ANATOMIC PATHOLOGY LAB, 800 Washington

617-636-5829

Street, Boston MA 02111

Director: J. Ryan Peña, MD, PhD, MS

Orena, Victor 34605960

Resulting Labs

Tufts AP CLIA: 22D0074723

TUFTS ANATOMIC PATHOLOGY LAB, 800 Washington Street, Boston MA 02111 617-636-5829

Director, J. Ryan Peña, MD, PhD, MS

TC25-00178

Page: 2 of 2

Printed: 1/30/2025 4:56 PM

Specimen Information

ID Type Draw Type Source Collected By

A Body Fluid Non-blood Pleural Cavity, Michelle Curtiss, RN 01/28/25
Collection Right 1210

Page: 14 of 19

2025-03-07 10:03:40 EST

18582441606

From: 8582441606

**Tufts**Medicine Tufts Medical Center

Tufts Medical Center Health Information

Management

800 Washington Street Boston MA 02111-1552 Orena, Victor

MRN: 34605960, DOB: 8/4/1934, Legal Sex: M

Adm: 1/18/2025, D/C: 1/30/2025

# 01/18/2025 - Admission (Discharged) in Tufts Medical Center Medical Surgical Unit (continued)

## Labs (continued)

Non-gynecologic cytology [205044801]

Ordering provider: Carl Tanba, MD 01/28/25 1046

Filed by: Yinan Hua, MD 01/30/25 1656 Resulting lab: TUFTS ANATOMIC PATHOLOGY LAB

Acknowledged by: Rameesha Mehreen, MD on 02/05/25 1126

Resulted: 01/30/25 1656, Result status: Final result

Order status: Completed

Collected by: Michelle Curtiss, RN 01/28/25 1210

CLIA number: 22D0074723

Components

Component Value Reference Range Flag Lab Case Report Tufts AP Result: Non-Gynecologic Cytology Case: TC25-00178 Authorizing Provider: Rameesha Mehreen, MD Collected: 01/28/2025 1210 Ordering Location: **Tufts Medical Center** Received: 01/29/2025 0807 Medical Surgical Unit Pathologist: Yinan Hua, MD Specimen: Pleural Cavity, Right Final Diagnosis Tufts AP

Result: A. Pleural Cavity, Right, Fluid:

Adequacy:

Satisfactory for evaluation

Interpretation:

ATYPICAL CELLS PRESENT

Numerous small lymphocytes and rare mesothelial cells, see note.

Note: There are numerous small lymphocyte in this fluid specimen, some of them are slightly bigger, which might represent a reactive process. If the pleural effusion persists and clinically indicated, a flow cytometry analysis should be considered.

Electronically signed by Yinan Hua, MD on 1/30/2025 at 1656

**Gross Description** 

Result:

Tufts AP

A. Received, labeled with the patient's name, "Orena, Victor" and medical record number, is 2.5cc hazy yellow tinged fresh fluid. Fluid is concentrated and one fixed Pap stained ThinPrep slide is prepared. Entire volume is concentrated but specimen is not suitable for cell block.

Grossed by BRAY, CHANELLE on 1/29/25 at 8:07 AM.

Document on 1/28/2025 12:10 PM by Yinan Hua, MD (below)

Page: 15 of 19

2025-03-07 10:03:40 EST

18582441606

TuftsMedicine
Tufts Medical Center

Tufts Medical Center Health Information

Management

800 Washington Street Boston MA 02111-1552 Orena, Victor

MRN: 34605960, DOB: 8/4/1934, Legal Sex: M

Adm: 1/18/2025, D/C: 1/30/2025

01/18/2025 - Admission (Discharged) in Tufts Medical Center Medical Surgical Unit (continued)

Labs (continued)

# **Tufts**Medicine

Tufts AP CLIA: 22D0074723

TUFTS ANATOMIC PATHOLOGY LAB, 800 Washington

617-636-5829

Street, Boston MA 02111

Director: J. Ryan Peña, MD, PhD, MS

Orena, Victor MRN: 34605960 Male, 90 yrs, 8/4/1934 508-793-1202

Non-Gynecologic Cytology (Final result)

TC25-00178

From: 8582441606

Authorizing Provider: Ordering Location: Rameesha Mehreen, MD Tufts Medical Center Medical Ordering Provider; Collected: Carl Tanba, MD 01/28/2025 1210

Pathologist:

Surgical Unit Yinan Hua, MD

Received;

01/29/2025 0807

**Specimens** 

A Pleural Cavity, Right

**Final Diagnosis** 

A. Pleural Cavity, Right, Fluid:

Adequacy:

Satisfactory for evaluation

Interpretation:

ATYPICAL CELLS PRESENT

Note: There are numerous small lymphocyte in this fluid specimen, some of them are slightly bigger, which might represent a reactive process. If the pleural effusion persists and clinically indicated, a flow cytometry analysis should be considered.

Electronically signed by Yinan Hua, MD on 1/30/2025 at 1656

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A. Received, labeled with the patient's name, "Orena, Victor" and medical record number, is 2.5cc hazy yellow tinged fresh fluid. Fluid is concentrated and one fixed Pap stained ThinPrep silde is prepared. Entire volume is concentrated but specimen is not suitable for cell block.

Grossed by BRAY, CHANELLE on 1/29/25 at 8:07 AM.

**Proposed Charges** 

<u>lD</u>	Protocol or Tasks	Charge Code	Qty
Α	Body Fluids	LAB88112	1

TC25-00178

Page: 1 of 2

Printed: 1/30/2025 4:56 PM

<sup>-</sup> Numerous small lymphocytes and rare mesothelial cells, see note.

Page: 16 of 19

2025-03-07 10:03:40 EST

18582441606

From: 8582441606

TuftsMedicine
Tufts Medical Center

Tufts Medical Center Health Information

Management

800 Washington Street Boston MA 02111-1552 Orena, Victor

MRN: 34605960, DOB: 8/4/1934, Legal Sex: M

Adm: 1/18/2025, D/C: 1/30/2025

01/18/2025 - Admission (Discharged) in Tufts Medical Center Medical Surgical Unit (continued)

Labs (continued)

# **Tufts**Wedicine

Tufts AP CLIA: 22D0074723

TUFTS ANATOMIC PATHOLOGY LAB, 800 Washington

617-636-5829

Street, Boston MA 02111

Director: J. Ryan Peña, MD, PhD, MS

Orena, Victor 34605960

Resulting Labs

Tufts AP CLIA: 22D0074723

TUFTS ANATOMIC PATHOLOGY LAB, 800 Washington

517-636-5829

Street, Boston MA 02111

Director: J. Ryan Peña, MD, PhD, MS

TC25-00178

Page: 2 of 2

Printed: 1/30/2025 4:56 PM

Page: 17 of 19

2025-03-07 10:03:40 EST

18582441606

From: 8582441606

**Tufts**Medicine Tufts Medical Center

Tufts Medical Center Health Information

Management

Orena, Victor MRN: 34605960, DOB: 8/4/1934, Legal Sex: M

800 Washington Street

Adm: 1/18/2025, D/C: 1/30/2025

Boston MA 02111-1552 01/18/2025 - Admission (Discharged) in Tufts Medical Center Medical Surgical Unit (continued)

Labs (continued)

Testing Performed By

Lab: Abbreviation Name Director Address Valid Date Range 29 - Tufts AP TUFTS ANATOMIC J: Rvan Peña, MD. 800 Washington Street 06/11/24 0902 - Present PATHOLOGY LAB Boston MA 02111 PhD, MS

All Reviewers List

Rameesha Mehreen, MD on 2/5/2025 11:26

Body fluid cell count with differential [205044805] (Final result)

Status: Completed

Order placed as a reflex to Body fluid cell count with differential [205044799] ordered on 01/28/25 at 1046 Ordering user: Carl Tanba, MD 01/28/25 1046

Authorized by: Rameesha Mehreen, MD Frequency: Routine Once 01/28/25 1047 - 1 occurrence

Quantity: 1

Class: Unit Collect

Lab status: Final result

Ordering mode: Standard

Ordering provider: Carl Tanba, MD

Instance released by: Carl Tanba, MD (auto-released) 1/28/2025 10:46 AM

Specimen Information

(D	Type	Draw Type	Source	Collected By
TM25-028-	Body Fluid	Non-blood	Pleural Cavity,	Michelle Curtiss, RN 01/28/25
HE0510		Collection	Right	1210

Body fluid cell count with differential [205044805] (Abnormal)

Ordering provider: Carl Tanba, MD 01/28/25 1046

Filed by: Lab, Background User 01/28/25 1412

Resulting lab: TUFTS MAIN LAB

Narrative:

Reference Ranges

Order status: Completed

Collected by: Michelle Curtiss, RN 01/28/25 1210

Resulted: 01/28/25 1412, Result status: Final result

CLIA number: 22D0074723

Peritoneal:

**RBC: Not Established** WBC/TNCC: < 500 cells/uL

Neutrophils: < 25%

All other body fluid types:

The reference range is not established for this test. The test result should be integrated into the clinical context for interpretation.

Components

Component	Value	Reference Range	Flag	Lab
Color, BF	Yellow	Straw, Colorless, Other - See Comment	Α!	TMC
Appearance, Fluid	Cloudy	Clear	A-I	TMC
RBC, BF	3,000	cells/uL	_	TMC
TNC, Body Fluid	5,101	cells/uL		TMC
Neutrophil %, Body Fluid	13	%		TMC
Lymphocytes %, Body Fluid	64	%	_	TMC
Mono/Macrophage Cells %, Body Fluid	5	%	<u> </u>	TMC
Eosinophils %, Body Fluid	15	%		TMC
Basophils %, Body Fluid	1	%		TMC
Atypical Lymphocytes %, Body Fluid	1	%		TMC
Mesothelial %, Body Fluid	11	%		TMC
Total Cells Counted, Body Fluid	100		_	TMC

Page: 18 of 19

2025-03-07 10:03:40 EST

18582441606

From: 8582441606

**Tufts**Medicine Tufts Medical Center Tufts Medical Center Health Information

Management

800 Washington Street Boston MA 02111-1552 Orena, Victor

MRN: 34605960, DOB: 8/4/1934, Legal Sex: M

Adm: 1/18/2025, D/C: 1/30/2025

01/18/2025 - Admission (Discharged) in Tufts Medical Center Medical Surgical Unit (continued)

Labs (continued)

**Testing Performed By** 

Director Name Valid Date Range Lab - Abbreviation Address 18 - TMC **TUFTS MAIN LAB** J. Ryan Peña, MD, 800 Washington Street 06/10/24 1020 - Present . PhD, MS

Boston MA 02111

Resulted: 01/28/25 1412, Result status: Preliminary result

Body fluid cell count with differential [205044805] (Abnormal)

Ordering provider: Carl Tanba, MD 01/28/25 1046 Filed by: Lab, Background User 01/28/25 1412

Resulting lab: TUFTS MAIN LAB

Narrative:

Reference Ranges

Order status: Completed

Collected by: Michelle Curtiss, RN 01/28/25 1210

CLIA number: 22D0074723

Peritoneal:

**RBC: Not Established** WBC/TNCC: < 500 cells/uL

Neutrophils: < 25%

All other body fluid types:

The reference range is not established for this test. The test result should be integrated into the clinical context for interpretation.

Components

Components				
Component	Value	Reference Range	Flag	Lab
Color, BF	Yellow	Straw, Colorless, Other - Sec Comment	Ä!	TMC
Appearance, Fluid	Cloudy	Clear	A4	TMC
RBC, BF	3,000	cells/uL		TMC
TNC, Body Fluid	5,101	cells/uL		TMC
Neutrophil %, Body Fluid	13	%		TMC
Lymphocytes %, Body Fluid	64	%		TMC
Mono/Macrophage Cells %, Body Fluid	5	%		TMC
Eosinophils %, Body Fluid	15	%	_	TMC
Basophils %, Body Fluid	1	%	<del>_</del>	TMC
Atypical Lymphocytes %, Body Fluid	1	%	_	TMC
Mesothelial %, Body Fluid	1	%	_	TMC
Total Cells Counted, Body Fluid	100	_	_	TMC

**Testing Performed By** 

Lab - Abbreviation	Name	Director	Address	Valid Date Range
18 - TMC	TUFTS MAIN LAB	J. Ryan Peña, MD, PhD. MS		06/10/24 1020 - Present

Resulted: 01/28/25 1252, Result status: Preliminary

Body fluid cell count with differential [205044805] (Abnormal)

Ordering provider: Carl Tanba, MD 01/28/25 1046 Filed by: Lab, Background User 01/28/25 1252

Resulting lab: TUFTS MAIN LAB

Narrative:

Reference Ranges

Order status: Completed

Collected by: Michelle Curtiss, RN 01/28/25 1210

CLIA number: 22D0074723

Peritoneal:

**RBC: Not Established** WBC/TNCC: < 500 cells/uL Neutrophils: < 25%

All other body fluid types:

Page: 19 of 19

2025-03-07 10:03:40 EST

18582441606

From: 8582441606

Tufts Medical Center

Tufts Medical Center Health Information

Management

800 Washington Street Boston MA 02111-1552 Orena, Victor

MRN: 34605960, DOB: 8/4/1934, Legal Sex: M

Adm: 1/18/2025, D/C: 1/30/2025

# 01/18/2025 - Admission (Discharged) in Tufts Medical Center Medical Surgical Unit (continued)

Labs (continued)

The reference range is not established for this test. The test result should be integrated into the clinical context for interpretation.

Components

Component	Value	Reference Range	Flag	Lab
Color, BF	Yellow	Straw, Colorless,	д!	TMC
		Other - See		
		Comment		
Appearance, Fluid	Cloudy	Clear	A <sup>-‡</sup>	TMC
RBC, BF	3,000	cells/uL	_	TMC
TNC, Body Fluid	5,101	cells/uL	_	TMC

**Testing Performed By** 

in Paris Company of the Company	A. C. San San San San San San San San San San	and the second s		
Lab - Abbreviati	on Name	Director	Address	Valid Date Range
18 - TMC	TUFTS MAIN LAB	J. Ryan Peña, MD,	800 Washington Street	06/10/24 1020 - Present
		PhD, MS	Boston MA 02111	

# Bureau of Prisons Health Services Cosign/Review

 Inmate Name:
 ORENA, VICTOR
 Reg #:
 07540-085

 Date of Birth:
 08/04/1934
 Sex:
 M
 Race:
 WHITE

 Scanned Date:
 03/07/2025 11:34 EST
 Facility:
 DEV

Cosigned by Churchville, Lawrence MD on 03/10/2025 11:40.

07540-085

### Heywood Hospital 242 Green St. Gardner, MA 01440

# Discharge Summary Signed

Patient: Orena,Victor DOB: 08/04/1934 Age/Sex: 90 / M

Loc: HE.W1 W122-1 Attending Dr: Edna A MarkAddy MD MR#: H000431760 Acct:HH0070081237 ADM Date: 02/28/25 Date of Discharge:

cc: Ryan Chua~

### **DS: Providers**

**Provider** 

Date of Service: 03/03/25

Date of admission: 02/28/25 14:02

Primary care physician:

Ryan Chua

# **DS: Diagnosis**

### Discharge Diagnosis

(1) Acute on chronic respiratory failure with hypoxia and hypercapnia:

Status: Acute

(2) T2DM (type 2 diabetes mellitus):

Status: Acute

(3) Acute on chronic systolic (congestive) heart failure:

Status: Acute

(4) Acute encephalopathy:

Status: Acute

# **DS: Summary**

### **Hospital Course**

Hospital Course:

Brief history of present illness.

For full details, please review H&P dictated on day of admission:

Victor Orena is a 90 y.o. male with a past medical history of CAD s/p DES to mid LAD (2022), AV block s/p PPM, HFrEF (LVEF 30% 2022), AAA s/p repair in 2019, HTN, HLD, IDDM2, CVA, Alzheimer's dementia, currently federally incarcerated initially presented to UMass-Leominster ED on 1/17/2025 with acute hypoxemic and hypercapnic respiratory failure and transferred to Tufts MICU 1/18 for further management of respiratory distress requiring BiPAP --> transferred to floor on 1/19 on 6L NC. Underwent right sided thoracentesis complicated by right pneumothorax status post chest tube placement from 1/24-1/29. Patient was also treated for Legionella pneumonia at Tufts. The patient was discharged back to the facility he originated from under police custody, with recommendations of rehab and home supplemental oxygen.

He presented to Leominster Hospital with acute respiratory symptoms:

At Leominster ER, evaluation revealed blood pressure of 136/60, heart rate of 71, saturating 94% on 4 L nasal cannula. He was tachypneic on exam. Blood work showed CBC of hemoglobin 10.7, BNP elevated to 4300 similar to prior, BMP was done which showed sodium 146 and K of three 2.5. Troponin high-sensitivity were elevated at 63 and 66. VBG showed CO2 retention.

Health Information Management 0303-00162

2

Patient name: Orena, Victor Account #: HH0070081237

HH

He received lasix 40 IV x2. Continued to have poor urine output with worsening hypoxemia with O2 needs increasing to 10L.

CT chest done showed mild central venous congestion, thickening of the central bronchial walls and diffuse interstitial prominence as above raise the possibility of venous congestion with mild chronic or early pulmonary edema.

Foley catheter was placed. Plavix was held transiently for possible thoracentesis.

Systolic blood pressure had also decreased to mid 80s. Patient started on Neo-Synephrine for blood pressure support. Due to lack of ICU beds, patient was transferred to Heywood ICU for further management.

On his arrival to the ICU patient remains lethargic, easily arousable, oriented to self only. Patient was placed on BiPAP 12/5 at 50% FiO2.

ABG shows 7.39/57/73 on 15 L Oximask.

### 1. Acute on chronic hypoxic and hypercapnic respiratory failure

Likely multifactorial etiology-pulmonary vascular congestion + pneumonia plus pleural effusion. Patient initially required BiPAP 12/5 alternating with HFNC and gradually transitioned to 3L large bore oxygen via nasal cannula.

Urine Legionella/strep pneumo antigen negative.

He was started on empiric vancomycin + cefepime. MRSA screen came back negative and vancomycin was discontinued and patient was continued on Cefepime.

He has been afebrile since admission with normal white count.

He denies any respiratory symptoms.

Blood cultures have showed no growth to date.

There is no indication to continue antibiotics and I will discontinue cefepime prior to his discharge. He will continue on his supplemental oxygen to maintain sat greater than 90%.

# 2. Acute on chronic systolic CHF exacerbation with underlying history of CAD/AAA repair/ AV block s/p PPM

He had possible cardiogenic shock requiring Neo-Synephrine for blood pressure support.

Shock resolved after pressors - felt to be likely due to hypovolemia.

There was no signs of sepsis.

He was restarted on low dose spironolactone

Low-grade troponin leak noted at OSH likely demand ischemia in the setting of acute on chronic systolic heart failure.

# 3. Acute encephalopathy-metabolic secondary CO2 retention versus septic with underlying dementia

Centrally acting medications avoided in the setting of acute encephalopathy Mental state at baseline

### 4. History of dysphagia

He passed bedside swallow evaluation by RN He is tolerating current diet. Protonix for GI prophylaxis

### 5. Diabetes mellitus II

Most recent A1c was 6.7 on 1/20/2025.

During admission, patient covered with ISS per inpatient protocol.

3

Patient name: Orena, Victor Account #: HH0070081237

Overall, patient has remained hemodynamically stable for discharge back to his correction facility.

Status at Discharge

Code Status on Discharge: Full Code

Time Attestation

Discharge coordination time: Greater than 30 minutes

Quality: Safe Use of Opioids (Hey)

Does Pt have an Active Cancer Diagnosis on the Problem List?: No

**Quality: Stroke** 

Does the patient have a stroke diagnosis?: No

# **Physical Exam**

Vital Signs: Vital Signs:

### **Last Vital Signs**

### BMI result

Body Mass Index

34.9

Const: General: cooperative, comfortable and no acute distress

HEENT: Head: Yes normocephalic and Yes atraumatic

Eyes: General: appearance normal, both eyes and all related structures

Neck: Other:

Supple. No JVD

Resp: Other:

No respiratory distress.

Diminished breath sounds bilaterally. No rales or wheezing. No rhonchi

Effort & Inspection: normal respiratory effort

Cardio: Rhythm: regular rhythm Heart sounds: S1 normal heart sound present and S2

normal heart sound present

Health Information Management 0303-00162

HH

Patient name: Orena, Victor Account #: HH0070081237

GI:

Other:

Soft, non tender with palpation. No guarding

Skin:

Other:

Limited skin examination without any suspicious lesions or jaundice

Neuro:

Other:

He is awake, alert and oriented to self

Extrem:

Other:

Bilateral compression device without any obvious edema

### **DS: Data**

# **Data Completed and Pending**

Labs on day of discharge:

### Laboratory Results - last 24 hr

	03/02/25	03/02/25	03/03/25
	16:34	21:16	06:05
WBC			6.91
RBC			3.87 L
Hgb		-	10.8 L
Hct		_	34.7 L
MCV			89.7
MCH			27.9
MCHC			31.1
RDW			14.8 H
Plt Count			188
Immature Gran % (Auto)		<del>-</del>	0.4
Neut % (Auto)			67.0 H
Lymph % (Auto)			19.2 L
Mono % (Auto)	-		11.0
Eos % (Auto)		<del></del>	1.4
Baso % (Auto)			1.0
Lymph # (Auto)			1.33
Mono # (Auto)	_		0.76
Eos # (Auto)			0.10
Baso # (Auto)	-		0.07
Abs Immat Gran (auto)	-	<del>-</del>	0.03
Absolute Neuts (auto)	-		4.62
Absolute Nucleated RBC		-	0.00
Nucleated RBC % (auto)	+		0.0
Sodium		-	145
Potassium		·	3.8
Chloride		_	105
Carbon Dioxide	<del>  </del>		30 H

Anion Gap		T	13
BUN			17
Creatinine			0.97
Estimated GFR		_	74
Glucose			167 H
POC Glucose	151 H	148 H	<u> </u>
Calcium			9.4
Phosphorus			2.5
Magnesium			2.30
Total Bilirubin			0.7
AST			14
ALT			7
Alkaline Phosphatase			45
Total Protein			6.6
Albumin			3.9
Globulin			2.7
Albumin/Globulin Ratio			1.5

	T	
	03/03/25	03/03/25
1415	07:31	11:09
WBC		
RBC		
Hgb		
Hct		
MCV		
MCH		
MCHC	-	
RDW		
Plt Count		
Immature Gran % (Auto)		
Neut % (Auto)		
Lymph % (Auto)		
Mono % (Auto)		
Eos % (Auto)		
Baso % (Auto)		
Lymph # (Auto)		
Mono # (Auto)		
Eos # (Auto)		
Baso # (Auto)		
Abs Immat Gran (auto)	<del></del>	
Absolute Neuts (auto)		
Absolute Nucleated RBC		
Nucleated RBC % (auto)		
Sodium		
Potassium		
Chloride		
Carbon Dioxide		
Anion Gap		
BUN	<del></del>	
Creatinine	<del></del>	<del></del>
Estimated GFR	<del></del>	

Glucose	<del>-</del>	T
POC Glucose	160 H	226 H
Calcium		
Phosphorus		
Magnesium		
Total Bilirubin		_
AST		
ALT		_
Alkaline Phosphatase		
Total Protein		
Albumin		
Globulin		_
Albumin/Globulin Ratio		

### Preliminary micro results at discharge

02/28/25 15:45 Blood	Blood Culture - Preliminary  No growth aerobic or anaerobic bottles after 48 hours incubation.
02/28/25 15:35 Blood	Blood Culture - Preliminary  No growth aerobic or anaerobic bottles after 48 hours incubation.

# Discharge Plan

Discharge

Anticipated Discharge Date/Time: 03/03/25 13:23

Patient Disposition: Xfer LTC

Discharge Diagnosis: Acute on chronic systolic congestive heart failure with underlying history of CAD, acute on chronic hypoxic and hypercapnic respiratory failure-stable

Discharge Medications:

Continued

atorvastatin 20 mg

20 mg PO BEDTIME

aspirin 81 mg Tablet

81 mg PO DAILY

calcium polycarbophil 625 mg

625 mg PO BEDTIME

clopidogrel 75 mg

75 mg PO DAILY

insulin NPH human semi-syn 100 unit/mL Suspension

22 unit SUBCUT BID

donepezil 5 mg

5 mg PO DAILY

insulin regular human 100 unit/mL Cartridge

8 unit subcut BID

Health Information Management 0303-00162

### **Tylenol**

650 mg PO TID

### bisacodyl

5 mg PO DAILY PRN (Reason: Constipation)

### cholecalciferol (vitamin D3)

1.25 mg PO Q4W

### citalopram

10 mg PO BEDTIME

### docusate sodium

100 mg PO BID PRN (Reason: Constipation)

### dorzolamide-timolol

22.3 mg ophthalmic (eye) BID

### ferrous gluconate

324 mg PO 3XW

### furosemide

40 mg PO BID

Rx Instructions:

hold for SBP < 100

### glucose

4 mg PO DAILY PRN (Reason: Hypoglycemia)

### guaifenesin

600 mg PO BID PRN (Reason: Secretions)

### latanoprost

0.005 % ophthalmic (eye) BEDTIME

### memantine

10 mg PO BID

### nystatin

100,000 units topical TID

### risperidone

0.5 mg PO DAILY PRN (Reason: Agitation)

### spironolactone

12.5 mg PO DAILY

### trazodone

50 mg PO BEDTIME

### **Discontinued**

### amoxicillin-pot clavulanate

875 mg PO BID

Rx Instructions:

for 7 days, starting on 2/24/25 end 3/3/25

### doxycycline hyclate

100 mg PO BID

Rx Instructions:

started on 2/24/25 ends on 3/3/25

### Discharge Orders:

Discharge Order (Routine); Ordered 03/03/25

Ordered By: Edna A MarkAddy

Activity on Discharge: As tolerated

Print Language: English

Health Information Management 0303-00162

Care Plan Goals:

Refer to discharge summary

Health Concerns:

Follow up with PCP upon discharge

Plan of Treatment:

As above

Assessment:

Acute on chronic hypoxic respiratory failure -stable

Dictated By:

Edna A MarkAddy MD

Signed By:

<Electronically signed by Edna A MarkAddy MD>

03/03/25 1413

DD/DT: 03/03/25 1329

TD/TT: 03/03/25 1329

Transcriptionist: EM

Patient: Victor Orena
Acct Num: HH0070081237
Med Rec Num: H000431760

Location: Watkins 1

Primary Provider: MarkAddy, Edna A

Date: 02/28/25

# Patient Visit Information Care Plan Goals:

Refer to discharge summary

### **Additional Health Concerns:**

Follow up with PCP upon discharge

### Additional Documents Given:

Hey/Ath Discharge Information Home Medications List Patient Discharge Packet

Name	Account Numb	er Med Rec Nur	n
Orena, Victor	HH0070081237	H000431760	
Plan of Treatment			and the second second second
As above			
Assessment		Avas in the definition and	man o campa and decided
Acute on chronic hypoxic respiratory failure -sta	ble		<u> </u>

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Home Medication List

Page: 1

Date: 03/03/25 14:01

Patient: Victor Orena

Medical Record Number: H000431760

Account: HH0070081237

If you have any Continued Medications, please take those medications until told to stop by your provider.

Please review the sections of this list carefully, and if you have any questions regarding your medications or medical equipment/supplies, contact your primary care physician.

### Continue Medications (23)

These are your current medications to keep taking at home.

### l. aspirin 61 mg

81 mg oral daily

Last Taken: 03/03/25 09:16 81 mg

Next Dose: Tomorrow (03/04/25) at 8:30 am

### atorvastatin 20 mg

20 mg oral bedtime

Last Taken: 03/02/25 20:41 20 mg Next Dose: Today (03/03/25) at 8:30 pm

### bisacodyl

5 mg oral daily as needed PRN Reason: Constipation Last Taken: Unknown

### 4. calcium polycarbophil 625 mg

625 mg oral bedtime Last Taken: Unknown

### cholecalciferol (vitamin D3)

1.25 mg oral every 4 weeks

Last Taken: Unknown

### 6. citalopram

10 mg oral bedtime
Last Taken: Unknown

### 7. clopidogrel 75 mg

75 mg oral daily

Last Taken: 03/03/25 09:16 75 mg

Next Dose: Tomorrow (03/04/25) at 8:30 am

### 8. docusate sodium

100 mg oral 2 times a day as needed

PRN Reason: Constipation Last Taken: Unknown

### 9. donepezil 5 mg

5 mg oral daily

Last Taken: 03/03/25 09:15 5 mg

Next Dose: Tomorrow (03/04/25) at 8:30 am

### dorzolamide-timolol

22.3 mg ophthalmic (eye) 2 times a day

Last Taken: Unknown

Home Medication List

Page: 2

Date: 03/03/25 14:01

Patient: Victor Orena

Account: HH0070081237

Medical Record Number: H000431760

If you have any Continued Medications, please take those medications until told to stop by your provider.

### Continue Medications (23)

These are your current medications to keep taking at home.

#### 11. ferrous gluconate

324 mg oral 3 times a week Last Taken: Unknown

#### 12. furosemide

40 mg oral 2 times a day hold for SBP < 100 Last Taken: Unknown

#### 13. glucose

4 mg oral daily as needed PRN Reason: Hypoglycemia Last Taken: Unknown

#### 14. guaifenesin

600 mg oral 2 times a day as needed

PRN Reason: Secretions Last Taken: Unknown

#### 15. insulin NPH human semi-syn 100 unit/mL

22 unit subcutaneous 2 times a day

Last Taken: Unknown

#### 16. 100 unit/mL insulin regular human

8 unit subcutaneous 2 times a day

Last Taken: Unknown

#### 17. latanoprost

0.005 % ophthalmic (eye) bedtime

Last Taken: Unknown

#### 18. memantine

10 mg oral 2 times a day

Last Taken: 03/03/25 09:15 10 mg

Next Dose: Today (03/03/25) at 8:30 pm

#### 19. nystatin

100,000 units topical 3 times a day

Last Taken: Unknown

#### 20. risperidone

0.5 mg oral daily as needed

PRN Reason: Agitation Last Taken: Unknown

#### 21. spironolactone

12.5 mg oral daily

Last Taken: 03/03/25 09:16 12.5 mg

Home Medication List

Page: 3

Date: 03/03/25 14:01

Patient: Victor Orena

Medical Record Number: H000431760

Account: HH0070081237

If you have any Continued Medications, please take those medications until told to stop by your provider.

### Continue Medications (23)

These are your current medications to keep taking at home.

Next Dose: Tomorrow (03/04/25) at 8:30 am

### 22. trazodone

50 mg oral bedtime Last Taken: Unknown

### 23. Tylenol

650 mg oral 3 times a day Last Taken: 02/28/25

### Discontinued Medications (2)

These are medications to stop taking at home.

### \*\* amoxicillin-pot clavulanate

875 mg oral 2 times a day for 7 days, starting on 2/24/25 end 3/3/25 Doctor's Order

Last Taken: 02/28/25

### \*\* doxycycline hyclate

100 mg oral 2 times a day started on 2/24/25 ends on 3/3/25

Doctor's Order Last Taken: Unknown STOP



Heywood \*Live\* M-AT HCIS Page: 1 of 4

Hey/Ath Discharge Information

Date: 03/03/25 14:01

Orena, Victor

Fac: Heywood Hospital Loc:Watkins 1 Bed:W122-1

90 M 08/04/1934 Med Rec Num: H000431760 Visit:HH0070081237 Reg Date: 02/28/25

Attending: Edna A MarkAddy

Reason: Acute on chronic hypoxic resp failure 

### Diagnosis

Type 2 diabetes mellitus without complications (02/28/25)

Encephalopathy, unspecified (02/28/25)

Acute on chronic systolic (congestive) heart failure (02/28/25)

Acute and chronic respiratory failure with hypoxia (02/28/25)

Acute and chronic respiratory failure with hypercapnia (02/28/25)

### Discharge Diagnosis

Discharge Diagnosis

Acute on chronic systolic congestive heart failure with underlying history of CAD, acute on chronic hypoxic and hypercapnic respiratory failure-stable

### Allergies

	- whose white	taranta di Constanti di Constan	was the same of th	iliani il	The state of the s	
 Allergy/AdvReac	Type	Severity	Reaction	Status	Date / Time	
topiramate [From Topamax]	Allergy		Unknown	Verified	02/28/25 16:4	9

### Advanced Directives

Health Care Proxy

Yes

### Height and Weight

Height Weight 5 ft 4 in 203 lb 7 oz

### Laboratory

03/03/25 11:09: POC Glucose 226 H 03/03/25 07:31: POC Glucose 160 H

03/03/25 06:05: WBC 6.91, RBC 3.87 L, Hgb 10.8 L, Hct 34.7 L, MCV 89.7, MCH 27.9, MCHC 31.1, RDW 14.8 H, Plt Count 188, Immature Gran % (Auto) 0.4, Neut % (Auto) 67.0 H, Lymph % (Auto) 19.2 L, Mono % (Auto) 11.0, Eos % (Auto) 1.4, Baso % (Auto) 1.0, Lymph # (Auto) 1.33, Mono # (Auto) 0.76, Eos # (Auto) 0.10, Baso # (Auto) 0.07, Abs Immat Gran (auto) 0.03, Absolute Neuts (auto) 4.62, Absolute Nucleated RBC 0.00, Nucleated RBC % (auto) 0.0, Sodium 145, Potassium 3.8, Chloride 105, Carbon Dioxide 30 H, Anion Gap 13, BUN 17, Creatinine 0.97, Estimated GFR 74, Glucose 167 H, Calcium 9.4, Phosphorus 2.5, Magnesium 2.30, Total Bilirubin 0.7, AST 14, ALT 7, Alkaline Phosphatase 45, Total Protein 6.6, Albumin 3.9, Globulin 2.7, Albumin/Globulin Ratio 1.5

03/02/25 21:16: POC Glucose 148 H 03/02/25 16:34: POC Glucose 151 H

Page: 2 of 4 Orena, Victor Bed:W122-1 Fac: Heywood Hospital Loc:Watkins 1 Visit: HH0070081237 Med Rec Num: H000431760 90 M 08/04/1934 Laboratory - Continued 03/02/25 11:14: POC Glucose 89 03/02/25 08:12: POC Glucose 90 03/02/25 05:05: WBC 6.94, RBC 3.68 L, Hgb 10.2 L, Hct 33.4 L, MCV 90.8, MCH 27.7, MCHC 30.5 L, RDW 14.8 H, Plt Count 182, Immature Gran % (Auto) 0.3, Neut % (Auto) 67.8 H, Lymph % (Auto) 19.6 L. Mono % (Auto) 9.7, Eos % (Auto) 1.9, Baso % (Auto) 0.7, Lymph # (Auto) 1.36, Mono # (Auto) 0.67, Eos # (Auto) 0.13, Baso # (Auto) 0.05, Abs Immat Gran (auto) 0.02, Absolute Neuts (auto) 4.71, Absolute Nucleated RBC 0.00, Nucleated RBC % (auto) 0.0, Sodium 144, Potassium 3.8, Chloride 104, Carbon Dioxide 29, Anion Gap 16, BUN 17, Creatinine 1.05, Estimated GFR 67, Glucose 76, Calcium 9.3, Phosphorus 2.8, Magnesium 2.20, Total Bilirubin 0.8, AST 13, ALT 6, Alkaline Phosphatase 41, Total Protein 6.5, Albumin 3.9, Globulin 2.5, Albumin/Globulin Ratio 1.6 03/01/25 19:24: POC Glucose 88 **03/01/25 16:22:** POC Glucose 92 **03/01/25 11:29:** POC Glucose 98 03/01/25 08:56: POC Glucose 99 03/01/25 06:07: POC Glucose 90 03/01/25 05:44: WBC 6.04, RBC 3.47 L, Hgb 9.6 L, Hct 31.9 L, MCV 91.9, MCH 27.7, MCHC 30.1 L, RDW 15.1 H, Plt Count 182, Immature Gran % (Auto) 0.5, Neut % (Auto) 72.1 H, Lymph % (Auto) 15.6 L, Mono % (Auto) 9.6, Eos % (Auto) 1.5, Baso % (Auto) 0.7, Lymph # (Auto) 0.94, Mono # (Auto) 0.58, Eos # (Auto) 0.09, Baso # (Auto) 0.04, Abs Immat Gran (auto) 0.03, Absolute Neuts (auto) 4.36, Absolute Nucleated RBC 0.00, Nucleated RBC % (auto) 0.0, PT 16.7 H, INR 1.36, Sodium 146 H, Potassium 3.8, Chloride 105, Carbon Dioxide 31 H, Anion Gap 14, BUN 18, Creatinine 1.09, Estimated GFR 64, Glucose 84, Calcium 8.8, Phosphorus 3.0, Magnesium 2.00, Total Bilirubin 0.9, AST 15, ALT 6, Alkaline Phosphatase 39 L, Pro-B-Natriuretic Pept 4561.0 H, Total Protein 6.2 L, Albumin 3.9, Globulin 2.3, Albumin/Globulin Ratio 1.7 03/01/25 00:10: POC Glucose 95 02/28/25 17:58: POC Glucose 116 02/28/25 15:47: Urine Color Yellow, Urine Appearance Clear, Urine pH 5.5, Ur Specific Gravity 1.025, Urine Protein Trace (low), Urine Glucose (UA) Negative, Urine Ketones Negative, Urine Hemoglobin 3+ H,

Urine Nitrite Negative, Urine Bilirubin Negative, Urine Urobilinogen 0.2, Ur Leukocyte Esterase Trace H, Urine RBC 25-30 A, Urine WBC 0-4, Urine Bacteria Rare, Hyaline Casts 2-5/LPF

02/28/25 15:41: Bld Gas Analysis Time 0313, Patient Temperature 98.6, ABG Sample Site RIGHT RADIAL. ABG pH 7.39, ABG pCO2 56.7 H, ABG pO2 73 L, ABG HCO3 34.6 H, ABG Total CO2 36 H, ABG O2 Saturation 94.8 L, ABG Base Excess 9.7 H, Allen Test POSITIVE BLOOD FLOW, FiO2 100, POC Glucose

02/28/25 15:35: WBC 7.57, RBC 4.30, Hgb 11.6 L, Hct 40.0 L, MCV 93.0, MCH 27.0, MCHC 29.0 L, RDW 15.4 H, Plt Count 245, Immature Gran % (Auto) 0.4, Neut % (Auto) 70.4 H, Lymph % (Auto) 15.5 L, Mono % (Auto) 12.7, Eos % (Auto) 0.5, Baso % (Auto) 0.5, Lymph # (Auto) 1.17, Mono # (Auto) 0.96, Eos # (Auto) 0.04, Baso # (Auto) 0.04, Abs Immat Gran (auto) 0.03, Absolute Neuts (auto) 5.33, Absolute Nucleated RBC 0.00, Nucleated RBC % (auto) 0.0, Sodium 145, Potassium 3.6, Chloride 102, Carbon Dioxide 34 H, Anion Gap 12, BUN 16, Creatinine 1.32 H, Estimated GFR 51, Glucose 112, Calcium 8.8, Magnesium 2.20, Total Bilirubin 0.6, AST 18, ALT 10, Alkaline Phosphatase 55, Total Protein 6.6, Albumin 3.6, Globulin 3.1, Albumin/Globulin Ratio 1.2, Procalcitonin 0.09 02/28/25 14:15: Ur L.pneumophila Ag Negative, Ur Strep pneumoniae Ag Negative

### Microbiology

02/28/25 15:42 Nares MRSA Culture - Final NO MRSA DETECTED

Page: 3 of 4 Orena, Victor Loc:Watkins 1 Bed: W122-1 Fac: Heywood Hospital Visit: HH0070081237 Med Rec Num: H000431760 90 M 08/04/1934 Impressions Chest X-Ray 02/28/25 15:00 IMPRESSION: Pulmonary edema. 2. Abandoned pacemaker leads within the left chest wall and a pacemaker battery pack and leads in the right chest wall. Care Team Visit Care Team Role Provider Type Ryan Chua Primary Care Provider Physician Specialty: Medical 978-798-6900 Phone: Edna A MarkAddy, MD Attending Provider Physician Specialty: . Hospitalist Phone: 978-669-5620 Keshav Parthasarathy, MD Admit Provider Physician Critical Care (Intensivists) Specialty: 978-632-3420 Phone:

For questions/concerns call Primary MD. (911 for Emergencies)
In lieu of Primary MD, if problem exists go to the nearest Emergency Department.

Results of all studies are listed unless noted as Pending. Contact Primary MD for any pending results.

Continue all current medications unless otherwise directed to stop.

Heywood Healthcare Patient Portal

Page: 4 of 4

Orena, Victor

Fac: Heywood Hospital Loc:Watkins 1 Bed:W122-1

90 M 08/04/1934 Med Rec Num: H000431760 Visit: HH0070081237

Heywood Healthcare offers a secure on-line interactive tool for patients to review their health information - Heywood Healthcare Patient Portal. This interactive web portal will enable patients and their families to take an active role in their care by providing easy, secure access to their health information via the Internet.

The Patient Portal provides patients with instant access to their health information, including laboratory results, medications, allergies, demographic information, visit history, and more. In addition to managing their own care, parents and health care proxies with authorized consent will appreciate the ability to access the records of those individuals for whom they provide care. Please note: In order to be set up to access another patient's portal, you will be required to come to the Medical Records Department in person at Heywood/Athol Hospital. Both the patient giving proxy access and the proxy will need to provide photo identification and complete the appropriate authorization.

If you are interested in enrolling in the Patient Portal, please visit our website at www.heywood.org. Then click on the Blue Patient Portal button on the top Right of the main page, then click on the Blue Self Enrollment button.

In order to initially enroll in the portal, you will need to enter some required information including the following:

Last name

First name

Date of birth

Please note: In order to enroll in the Patient Portal, we need to have your email address on file in your electronic medical record. The email address needs to be specific for one person (yourself) in order for the Portal enrollment to be successful. You can update your email address in person with our Registration staff when you are registering for a hospital visit. Otherwise, you will need to come to the Medical Records Department at Heywood Hospital or Athol Hospital, which are open Monday through Friday from 8:00am-5:00pm. You will be required to present a photo ID and an Email Address you provided: no@email.com

Once you have successfully enrolled, you will receive an email containing a link for you to create your own portal user id, password, and security questions. Once enrolled as a user in the Patient Portal, you can access your portal via the Log on button on our website at any time.

Your health information can also be accessed through an application such as those used on a smartphone or tablet. To access information such as your medications, allergies, or lab results the Health and Wellness App is available in the App Store or Google Play.

We encourage all of our patients to enroll in the Patient Portal as it presents a valuable opportunity for patients and their families to actively participate in their care and stay healthy.

\*For information regarding pending tests or further questions about other details of the inpatient care, please contact your primary care.

HH0070081237 02/28/25 Date: 03/03/25 14:34 W122 - 1Page: 1 of 7 Room-Bed: Visit: Reg Date: Transfer/Referral Form-Hey/Ath Continued on Page **Medical History** Diagnosis Med Rec Num: H000431760 Location: Watkins 1 Acute and chronic respiratory failure with hypercapnia (02/28/25) Acute on chronic systolic (congestive) heart failure (02/28/25) Acute and chronic respiratory failure with hypoxia (02/28/25) Type 2 diabetes mellitus without complications (02/28/25) Reason: Acute on chronic hypoxic resp failure Presence of cardiac pacemaker for complete AV block History of placement of stent in LAD coronary artery NSTEMI (non-ST elevated myocardial infarction) Polyneuropathy due to type 2 diabetes mellitus Encephalopathy, unspecified (02/28/25) CKD (chronic kidney disease), stage III BPH (benign prostatic hyperplasia) Facility: Heywood Hospital **Attending:** Edna A MarkAddy T2DM (type 2 diabetes mellitus) Heywood \*Live\* M-AT HCIS ron deficiency anemia 90 M 08/04/1934 HLD (hyperlipidemia) Alzheimer dementia Alzheimer's disease AV block, complete PNA (pneumonia) Cardiomyopathy Orena, Victor Osteoarthritis Hypertension Hemorrhoids Heart failure Constipation Glaucoma Anemia

Orena, Victor			Page	2 of 7
Facility: Heywood Hospital 90 M 08/04/1934	Location:	Watkins 1 H000431760	Room-Bed:	
			V181C	t: HHUU70081237
		Surgical History		
History of AAA (abdominal aortic aneurysm) repair	2 8 8 10 2 24		, , , , , , , , , , , , , , , , , , , ,	to the same section of the late of
instally of catallact extraction with lens replacement	n Iens replacement			
	12.			
		Allergies		
topiramate [From Topamax] Allergy (Verified 02/28/25 1 Unknown	'gy (Verified 02/28/25 16:49)	in the contract of the contrac	And the second of the second o	desired and taken in
	Code Stat	Code Status while Hosnitalized		
Resuscitation Status Full Code	i i	the second secon	And the second s	Control of the Contro
				manuscript to the state of the
es de la companya de		Advanced Directives		
Health Care Proxy	Yes			1
	Last 9	Set of Vital Signs		
indebanden, memmyer, memberstenner, manden in menen un einstellenden menem und de 200,000 versichen mene versichenden,	Commence of the state of the st	- Apple made and apple	The state of the s	
	Temperature Source	98.2 F		the strategy to the designation later to the contract of the country and the c
	Pulse Rate	97	03/03/25 11:35	_
	Pulse Location	Automated	03/03/25 11:35	
	Respiratory Rate	16	03/03/25 11:35	
	Blood Pressure	151/81 H	03/03/25 11:35	
	Rlood Pressure Position	Upper Arm- Left	03/03/25 11:35	
	Blood Pressure Mass	Semi Fowlers	03/01/25 18:01	
	Pulse Oximetry	93	03/03/25 11:35	
	Conti	Continued on Page 3		

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Urena, Victor	3
Facility: Heywood Hospital Location: Watkins 1 90 M 08/04/1934 Med Rec Num: HODDA31760	
Last Set of Vital Signs - Continued	Visit: HH0070081237
lethod Nasal Cannula	35
Fraction of Inspired Oxygen 40 03/03/25 11:35	35
12/5	00
Last Bowel Movement	
Last Bowel Movement 03/02/25	
Height & Weight	
Height and Weight	
Freq: DAILY@0600	
	Status: Active
Document 03/03/25 06:00 HM (Rec: 03/03/25 06:54 HM HEHHTSDT08)	
Weight	
Height 5 ft 4 in	
Measurement Mothod	
Built	
BMI Classification	
esity Class	
Height and Weight St. Freg: 0600	1
	Status: Complete
Document	
L	
od	
95700	
Body Mass Index (kg/m²)	
יייייייייייייייייייייייייייייייייייייי	
Continued on Page 4	

Orena, Victor	Page: 4 of 7
Facility: Heywood Hospital Location: Watkins 1 90 M 08/04/1934 Med Rec Num: H000431760	Room-Bed: W122-1
	ı
Obesity Class	
	Access to the second se
	The state of the s
A	28/25 15:44
Freq: OSHIFT	s: Active
Document	
ical - Within Defined Darameters	
	les, except
,	
Arousable to Verbal Stimuli	
Speech Clear and Appropriate	
Intact	
Notation of the National Natio	
ACCOUNT OF DISCONTINUING THE PROPERTY OF THE P	
Absence of Dizziness/Vertido.	
Absence of Recent Seizure Activity	
Neurological Comment	dementia
Behavioral - Within Defined Parameters	Yes, except
Query Text:WDP- Patient is Calm and Cooperative	
EENT	
EENT - Within Defined Parameters	
Query Text:WDP-No Visual or Hearing Changes	
Sclera White. Absence of Eve Drainage	
Absence of Ear Discharge	
Nares Patent	
Absence of Nasal Drainage	
Mucous Membranes Moist, Pink and Intact	
f Mouth	
Cardiovascular	
Cardiovascular - Within Defined Parameters	
Query Text:WDP-Pulse Rhythm Regular	
Peripheral Pulses Palpable	
Continued on Page 5	

Orena, Victor	Page: 5 of 7
Facility: Heywood Hospital Location: Watkins 1 90 M 08/04/1934 Med Rec Num: HODD431760	
	Visit: HH0070081237
Heart Sounds Normal (Auscultated Heart Sounds S1 & S2 Only) Capillary Refill < 2 Seconds	
I	
οĘ	
e of	
Respiratory	
Respiratory - Within Defined Parameters	Yes event
Query Text:WDP-Respirations even and non labored	
ounds Clear	
o f	
Absence of Sputum	
Absence of Airway Obstruction	
Gastrointestinal	
Gastrointestinal - Within Defined Parameters	1
Query Text:WDP-Abdomen Soft and Non-Tender	ids, except
Bowel Sounds X 4 Auscultated	
Absence of Nausea and Vomiting	
Absence of Diarrhea and Constipation	
Absence of Incontinence	
Bowel Pattern Normal. If Post-Op, Passing Flatus	
Absence of Ostomy/Gastric Feeding Tube	
Genitourinary	
Genitourinary - Within Defined Parameters	Y 2000 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Query Text:WDP- Absence of Incontinence.	
Absence of Catheter (External, Indwelling or Intermittent)	
Clear and Yellow	
Urine has no Odor	
Absence of Bladder Distention and Retention.	
Absence of Painful Urination	
Absence of Vaginal/Penile Discharge or Odor	
Foley Catheter Present	30%
Intequmentary	מטי
Intequmentary - Within Defined Parameters	4x00000
Query Text:WDP- Skin Color Appropriate for Ethnicity	
Continued on Page	9

HH0070081237 W122-1 02/28/25 15:44 Low Position, Call light within Reach, Page: 6 of Repositioned to Left, Repositioned to Personal Belondings in Patient Reach Room-Bed: Bed Alarm on and Functioning, Bed in Visit: Status: Active Right, Repositioned to Supine Pressure Injury, Skin Tear Start: Awake most of the day 2 Person Assist 1 Person Assist 1 Person Assist Person Assist Person Assist Person Assist Person Assist Person Assist Person Assist Teeth Brushing Yes, except Sponge Bath Staff Fair HEHHTSDT03) **ADL Information** Continued on Page Med Rec Num: H000431760 Skin Intact and Absence of Alterations in Skin Integrity Location: Watkins 1 Query Text:WDP-Strength and Movement of all Extremities Absence of Weakness, Swelling, Tenderness or Fractures ΉN (Rec: 03/03/25 10:00 Musculoskeletal - Within Defined Parameters Absence of Musculoskeletal Impairment Level of Ambulation Independence Purposeful Rounding Conducted 03/03/25 09:57 NH Upper Body Dressing Ability Lower Body Dressing Ability Facility: Heywood Hospital Eating (Feeding) Ability Catheter Care Done By Skin Turgor Normal Activity/Functional ADLs Assessment - Continued Tolerate's Activity Safety Precautions Oral Care Ability Toileting Ability Activity Ability Patient Activity Grooming Ability Activity Assessment Bathing Ability Skin Problem 90 M 08/04/1934 Sleep Pattern Bathing Type Musculoskeletal Oral Care Otena, Victor 08H Document Protocol: Fred:

•	Orena, Victor		Page: 7 of 7
	Facility: Heywood Hospital 90 M 08/04/1934 ADL Information - Continued	Location: Watkins 1 Med Rec Num: H000431760	Room-Bed: W122-1 Visit: HH0070081237
	Indwelling Urinary Catheter Care		Bad Hund Below Bladder, Catheter Properly Secured, Closed System Intact, Tubing Free of Kinks
		Discharge Data	
	Inpatient Discharge Date/Time: Inpatient Discharge Disposition: Xfer LTC Inpatient Discharge Comment:	LTC	
	Observation Discharge Date/Time: Observation Discharge Disposition: Observation Discharge Comment:		

# Bureau of Prisons Health Services Cosign/Review

 Inmate Name:
 ORENA, VICTOR
 Reg #:
 07540-085

 Date of Birth:
 08/04/1934
 Sex:
 M
 Race:
 WHITE

 Scanned Date:
 03/07/2025 08:30 EST
 Facility:
 DEV

Cosigned by Churchville, Lawrence MD on 03/10/2025 11:40.

# CT CHEST W CONTRAST

### Orena, Victor

MRN: 520200765, Sex Assigned at Birth: Male, 8/4/1934 (90 yrs), Emergency

Accession #: 36108694



### Final Result

INDICATION: prior effusions/SOB area per clinical record: "90-year-old with history of CHF who is reportedly from the facility not on any oxygen but prior notes that he is on 2 L of oxygen at baseline but given his presenting who has history of dementia who was found to be 88% on room air this morning and only mildly improved with put on 2 L and was escalated to 4 L but he improved to 93%. Patient was recently seen here in January and was having similar symptoms at that time was found to have bilateral pleural effusions with questionable pneumonia versus pulmonary edema was given Lasix and treated for his pneumonia. He had a VBG done at that time that showed that he had acidosis but that he was not retaining any CO2 the decision was made to put him on high flow since he was not able to tolerate BiPAP due to his mental status with his dementia. He eventually was transferred to Tufts Medical Center for the bilateral pleural effusions that were found. There he had drainage of his

effusions and was found to have a pneumothorax afterwards was treated with chest tube also was noted to have Legionella pneumonia and was treated for this.. The present is not able provide me any further information as to what ultimately happened with that. But he was logical at the present was doing well. And they state now that he feels like he has been short of breath again. Here the patient wakes up and is able to answer all my questions and have a full discussion with me. States that he does not have any acute complaints but does feel short of breath if he tries to get up and move around. He denies any abdominal pain any chest pain any nausea vomiting any urinary symptoms."

### EXAMINATION: CONTRAST ENHANCED CT OF THE CHEST:

TECHNIQUE: Axial images were acquired from the thoracic inlet through the upper abdomen following the introduction of IV contrast. Coronal and sagittal reconstructions of the axial data were constructed for review.

COMPARISONS: 1/17/2025

### FINDINGS:

LUNGS: Stable calcified left lingular nodule. Diffuse interstitial prominence with thickening of the interlobular septae throughout. Central vasculature appear mildly prominent especially in the upper lung zones and there is central and mid peripheral thickening of the bronchial markings. Findings raise the possibility of mild or early pulmonary edema. Mild relaxation at electasis is seen at the right base, otherwise the airspace is clear.

PLEURAL SPACE: The pleural space demonstrates no evidence for pneumothorax. A small layering right pneumothorax is noted, stable or slightly smaller than on previous examination. There are no masses appreciated.

VESSELS: The aorta demonstrates normal course and contour. The vena cava demonstrates normal course and contour. The pulmonary arteries enhance normally and demonstrate normal configuration.

HEART AND MEDIASTINUM: The heart demonstrates grossly normal appearance on this noncardiac gated examination. The pericardium is unremarkable. The trachea and central bronchi are unremarkable.

THORACIC WALL AND SPINE: Ribs demonstrate normal architecture and density. The sternum is unremarkable. The thoracic spine demonstrates normal density and vertebral architecture. There is normal alignment with normal thoracic kyphosis.

### IMPRESSION:

Mild central venous congestion, thickening of the central bronchial walls and diffuse interstitial prominence as above raise the possibility of venous congestion with mild chronic or early pulmonary edema.

Stable or slightly smaller right pleural effusion when compared to previous.

If this radiology report contains a blank impression section, it is an incomplete radiology report. Please contact the interpreting radiologist or applicable radiology division as soon as possible to obtain the completed interpretation. Workstation ID: FS1HPACSW31

Up-to-date CT equipment and radiation dose reduction techniques were employed. CTDIvol: 21.4 mGy. DLP: 748 mGy-cm.

# Appointment Info

Exam Date

2/27/2025

Department

UMass Memorial- HealthAlliance-Clinton Hospital Leominster Campus CT Scan

© 978-466-2685

• 60 Hospital Road Leominster MA 01453

# Reason for Exam

prior effusions/SOB

# Diagnosis

No diagnosis was entered

# **Providers**

PCP

Has No Pcp Or Ref Patient

No number on file

O DO NOT EDIT THIS RECORD VIA PROVIDER ON THE FLY

Ordering Provider
Michael Joseph Bernazzani, MD

508-421-1700

55 Lake Avenue North Emergency Medicine Worcester MA 01655

# Bureau of Prisons Health Services Cosign/Review

 Inmate Name:
 ORENA, VICTOR
 Reg #:
 07540-085

 Date of Birth:
 08/04/1934
 Sex:
 M
 Race:
 WHITE

 Scanned Date:
 03/03/2025 09:00 EST
 Facility:
 DEV

Cosigned by Churchville, Lawrence MD on 03/04/2025 15:46.

# XR CHEST PORTABLE 1 VIEW



Orena, Victor

MRN: 520200765, Sex Assigned at Birth: Male, 8/4/1934 (90 yrs), Emergency

Accession #: 36108455

07540-085

### Final Result

EXAMINATION/TECHNIQUE: XR CHEST PORTABLE 1 VIEW:

INDICATION: Hypoxia

COMPARISON:

Chest radiograph 1/18/2025 1/17/2025, 6/26/2019; CT chest 1/17/2025

FINDINGS:

The patient is rotated to the left.

Lines/Tubes/Devices: Right pectoral pacemaker with leads terminating in the right atrium and right ventricle. Abandoned left pectoral pacemaker leads terminating in the right atrium and right ventricle.

Lungs: Low lung volumes. Diffuse reticular opacity similar to prior. No definite consolidation.

Pleura: Moderate right pleural effusion. Small left pleural effusion. No pneumothorax.

Heart and Mediastinum: The cardiac and mediastinal contours are enlarged, essentially unchanged; evaluation is limited due to effusions and patient positioning.

Bones: No acute osseous abnormality.

IMPRESSION:

Cardiomegaly with pulmonary edema and moderate right and small left pleural effusions.

I, Hemang Kotecha, have reviewed the examination and concur with the findings as reported or so edited. Trainee: Eric Schmidt

If this radiology report contains a blank impression section, it is an incomplete radiology report. Please contact the interpreting radiologist or applicable radiology division as soon as possible to obtain the completed interpretation. Workstation ID: LS1RADW02E

Signed by Hemang M. Kotecha, DO on 2/28/2025 1:48 AM

# Appointment Info

Exam Date

**5** 2/27/2025

Department

UMass Memorial- HealthAlliance-Clinton Hospital Leominster Campus XRay

© 978-466-2685

**Q** 60 Hospital Road

Leominster MA 01453

# Reason for Exam

hypoxia

# Diagnosis

No diagnosis was entered

# **Providers**

PCP

Has No Pcp Or Ref Patient

**Q** DO NOT EDIT THIS RECORD VIA PROVIDER ON THE FLY

Ordering Provider Michael Joseph Bernazzani, MD

**508-421-1700** 

55 Lake Avenue North Emergency Medicine Worcester MA 01655

# Bureau of Prisons Health Services Cosign/Review

 Inmate Name:
 ORENA, VICTOR
 Reg #:
 07540-085

 Date of Birth:
 08/04/1934
 Sex:
 M
 Race:
 WHITE

 Scanned Date:
 03/03/2025 08:59 EST
 Facility:
 DEV

Cosigned by Churchville, Lawrence MD on 03/04/2025 15:46.

# Orena, Victor

MRN: 520200765

Suraj Rao, MD

H&P 🗘 🖳

Date of Service: 2/27/2025 5:40 PM

Physician

Addendum

Hospital Medicine

07540-085

### **HISTORY AND PHYSICAL**

### **CHIEF COMPLAINT:**

Shortness of breath

### **HISTORY OF PRESENT ILLNESS:**

Patient is a 90-year-old male with a history of CHF, Alzheimer's disease, anemia, diabetes mellitus, presents from prison facility he is on 2 L of oxygen at baseline but this is unclear as patient has dementia. He was apparently put on 4 L and saturating at 93%. History is fairly unreliable as patient has dementia. He thinks that he is from Long Island.

Recent admission at Tufts Medical Center for bilateral pleural effusions that were found and had to be drained. He was also found to have a pneumothorax after that. He had Legionella pneumonia and was treated for this at that time. What prompted this admission was that he was felt like he was short of breath again.

ED evaluation revealed blood pressure of 136/60, heart rate of 71, saturating 94% on 4 L nasal cannula. He was tachypneic on exam. Blood work showed CBC of hemoglobin 10.7, BNP elevated to 4300 similar to prior, BMP was done which showed sodium 146 and K of three 2.5. Troponin high-sensitivity were elevated at 63 and 66. VBG showed CO2 retention.

Review of systems: All other systems were reviewed and were negative.

### **PAST MEDICAL HISTORY:**

Past Medical History:

Diagnosis

Date

- Alzheimer disease (HCC)
- Anemia
- Diabetes mellitus (HCC)
- Glaucoma
- Hypertension

### **PAST SURGICAL HISTORY:**

Past Surgical History:

Procedure

Laterality

Date

- ABDOMINAL AORTIC ANEURYSM REPAIR
- CARDIAC ELECTROPHYSIOLOGY PROCEDURE
   N/A
   4/26/2018
   Procedure: Generator extraction; Surgeon: Robert M Hayward Jr., MD; Location: UNV Heart Vasc Int Lab; Service:
- PR REANEURYSM/GRFT INS,ABDOMINAL AORTA
   N/A
   6/24/2019
   Procedure: REPAIR OF ABDOMINAL AORTIC ANEURYSM USING GRAFT; Surgeon: Elias J Arous, MD;
   Location: UNV OR; Service: Vascular

Scheduled Meds:[START ON 2/28/2025] aspirin, 81 mg, oral, Daily atorvastatin, 20 mg, oral, Nightly calcium polycarbophiL, 625 mg, oral, Nightly [START ON 2/28/2025] clopidogreL, 75 mg, oral, Daily donepeziL, 5 mg, oral, Nightly [START ON 2/28/2025] DULoxetine DR, 30 mg, oral, Daily enoxaparin, 40 mg, subcutaneous, Daily [START ON 2/28/2025] furosemide, 40 mg, intravenous, 2x daily

3/2/25, 3:37 PM

insulin lispro, 1-5 Units, subcutaneous, 3x daily with meals [START ON 2/28/2025] insulin NPH, 22 Units, subcutaneous, Daily with breakfast insulin NPH, 22 Units, subcutaneous, Nightly [START ON 2/28/2025] lisinopriL, 20 mg, oral, Daily memantine, 10 mg, oral, 2x daily sodium chloride, 2.5-10 mL, intravenous, See admin instructions And sodium chloride, 2.5-10 mL, intravenous, q12h SCH [START ON 2/28/2025] spironolactone, 12.5 mg, oral, Daily

ISTART ON 2/28/2025] tamsulosin, 0.4 mg, oral, Daily

Continuous Infusions:

PRN Meds:.PRN medications: acetaminophen, dextrose \*\*OR\*\* dextrose \*\*OR\*\* dextrose \*\*OR\*\* glucagon, ondansetron, risperiDONE, senna

### **ALLERGIES:**

Topamax [topiramate]

### **SOCIAL HISTORY:**

Social History

Tobacco Use

Smoking status:Smokeless tobacco:

Former

Never

Tobacco comments:

Substance Use Topics

Alcohol use:

Not Currently

### **Social Documentation**

No social documentation on file.

### **FAMILY HISTORY:**

No family history on file.

### Objective -

### PHYSICAL EXAM:

General: Normal appearing, sitting up in bed, appears comfortable, speaking in full sentences. Pleasantly confused at baseline,

Psych: alert and oriented to self only.

HEENT: NC/AT, PERRL, EOMI, sciera anicteric, nares clear, MMM

Neck: supple, no LAD, no JVD, no bruits, no thyromegaly

CV: RRR no MRG

Lungs: Crackles present bilaterally. On 4 L nasal cannula

Abd: soft, nontender, no guarding, no masses

Ext: no edema, no cords

Neuro: moving all 4 and follows commands

### LAB:

Recent Results (from the past 48 hours)
COVID-19, Flu A/B & RSV RNA PCR, Symptomatic
Collection Time: 02/27/25 1:33 PM

Specimen: Nares; Swab

Result

Value

Ref Range

6, 3:37 PM		Orena, vic	מסו (מואנא פצטצטטיים:
PCR, SAR	S CoV-2	Not Detected	Not Detected
Flu A RNA Flu B RNA RSV RNA	PCR PCR	Not Detected Not Detected Not Detected	Not Detected
	Time: 02/27	7/25 1:34 PM eripheral; Bloc	d
Result WBC		Value 7.6	Ref Range 3.8 - 10.8 10*3/uL
RBC		3.82 (L)	4.20 - 5.80 10*6/uL
Hemoglobi	n	10.7 (L)	13.2 - 17.1 g/dL
Hematocrit	:	34.4 (L)	38.5 - 50.0 %
MCV		90.1	80.0 - 100.0 fL
MCH		28.0	27.0 - 33.0 pg
MCHC		31.1 (L)	32.0 - 36.0 g/dL
RDW Platelets		15.4 (H) 214	11.0 - 15.0 % 140 - 400
MPV Neutrophil Immature ( Lymphocyt Monocyte Eosinophil Basophil ( Neutrophil Immature ( Lymphocyt Monocyte Eosinophil Basophil ( RBC ( nRBC ( )	Grans % te % % # Grans # te # #	10.1 79.4 0.4 9.9 9.5 0.4 0.4 6.05 0.03 0.80 (L) 0.70 <0.03 <0.03	10*3/uL 7.5 - 12.5 fL % 0.0 - 0.9 % % % % 1.50 - 7.80 10*3/uL <=0.03 10*3/uL 0.85 - 3.90 10*3/uL 0.20 - 0.95 10*3/uL 0.02 - 0.50 10*3/uL 0.00 - 0.20 10*3/uL /100 WBCs <0.01 10*3/uL
	Time: 02/2	7/25 1:34 PM Peripheral; Bloo Value 146 (H)	Ref Range 135 - 145
κ		2.5 (LL)	mmol/L 3.5 - 5.3
CI		108 (H)	mmol/L 98 - 107 mmol/L
CO2		29	22 - 32 mmol/L
BUN		13	7 - 23 mg/dL

		ė.	
3:37 PM		Orena, Vid	tor (MRN 5202007
Creatin	ine	0.95	0.60 - 1.30 mg/dL
Glucos	е	81	65 - 99 mg/dL
Calciun	ı	7.5 (L)	8.6 - 10.5 mg/dL
Anion 0 eGFR	Gap .	9 76	5 - 15 >=60 mL/min/1.73 m2
		7/25 1:34 PM Peripheral; Bloc Value 1.6	od Ref Range 1.6 - 2.4
Collecti Specim Result Tropon Sensitiv	ien: Venous, F in T High	7/25 1:34 PM Peripheral; Bloo Value 63 (HH)	mg/dL od Ref Range <=21 ng/L
Specim Result Pro-B-1 Natrium Repeat Trop	en: Venous, F Type etic Peptide enin #1	7/25 1:34 PM Peripheral; Bloo Value 4,376 (H)	od Ref Range <300 pg/mL
Specim Result Tropon Sensitiv Venous Block	ien: Venous, F in T High vity od Gas (VBG)		od Ref Range <=21 ng/L
Specim		7/25 2:40 PM Peripheral; Bloc	
Pesult pH, Ver pCO2,	nous Venous	Value 7.35 64.9 (H)	Ref Range 7.32 - 7.42 30.0 - 63.0
pO2, V	en	59.3 (H)	mm[Hg] 12.0 - 43.0 mm[Hg]
нсоз,	Venous	32 (H)	22 - 26

POCT Glucose, interfaced

Base Excess, Ven

O2 Sat, Venous

Collection Time: 02/27/25 5:38 PM

Result Value Ref Range
Glucose, POCT 97 70 - 99
mg/dL

### **HOSPITAL PROBLEMS:**

Principal Problem: Heart failure (HCC)

Active Problems:

AAA (abdominal aortic aneurysm) without rupture (HCC)

88.3 (H)

8.6 (H)

mmol/L

mmol/L

% -7.0 - 2.0

74.0 - 76.0

3/2/25, 3:37 PM

HTN (hypertension)
Alzheimer disease (HCC)
Hypokalemia
Hypernatremia
Type 2 diabetes mellitus (HCC)

### Assessment & Plan -

兖

CHF exacerbation

Acute hypoxic respiratory failure status post AICD

NSTEMI, likely type II due to demand ischemia

Patient unclear if he uses oxygen at facility, he is currently on 4 L nasal cannula, possible baseline of 2? Echocardiogram from Tufts medicine in 1/2025 shows EF of 30 to 35% with moderate global hypokinesis of left ventricle.

BNP is elevated at 4376 and troponin elevations at 63 and 66.

He recently had to get pleural effusions drained at Tufts Medical Center

Will continue Lasix 40 mg IV twice daily

Cardiology consult, measures input and output

Daily weights

Continue fluid restriction

Continue spironolactone

Hyponatremia

Likely in the setting of poor oral intake Continue to encourage oral intake Avoid IV fluids due to CHF exacerbation

Hypokalemia Potassium of 2.5 Repleted with KCI Check potassium tonight

Hypertension Continue Lasix., lisinopril

Conunue Lasix,, lisir

Dementia

Continue donezepil, memantine, Cymbalta

Risperdal as needed for agitation

Type 2 diabetes mellitus

Continue NPH insulin daily and nightly with insulin sliding scale

**BPH** 

Continue tamsulosin

Known history of AAA status postrepair Stable at this time

**GLOBAL PLAN OF CARE:** 

Code Status: Presumed Full Code

### FLUIDS/ELECTROLYTES/NUTRITION:

**Dietary Orders** 

(From admission, onward)

Start		·		Ordered
<b>Pris</b> Re	Piet, Adult Regular, Cardiac; 1500 mL Fluid; 50 gm Fat; 2,300 mg Na; Prisoner Safety Tray Diet effective now References: Click here for diet reference sheet if patient ordered for GVHD diet IDDSI		02/27/25 1643	
Q	uestion	Answer	Comment	
Ō	ÎET TYPE	Regular		
D	IET TYPE	Cardiac		
О	ral Fluid Restriction	1500 mL Fluid		
To	otal / 24Hr			
· Fa	at Restriction	50 gm Fat	•	
	odium Restriction pecial Tray Instruction	2,300 mg Na	•	
اح	pecial may moundedon	Frisorier Salety Tray		

## **VTE PROPHYLAXIS:**

Current Facility-Administered Medications Medication

- [START ON 2/28/2025] aspirin
- [START ON 2/28/2025] clopidogreL
- enoxaparin

## **DISCHARGE PLANNING/PLACEMENT:**

Based on the history, comorbidities, severity of signs and symptoms, current medical needs, and the risk of an adverse event, I expect this patient's care to require 3 overnight/overnights in the hospital.

I spent a total of 80 minutes on the date of encounter, which included:

- · Preparing to see the patient (e.g., review of test results)
- · Obtaining and/or reviewing separately obtained history
- · Performing a medically appropriate exam and/or evaluation
- Counseling and educating the patient/family/caregiver
- · Ordering medications, tests, procedures
- · Referring and communicating with other healthcare professionals, when not separately reported
- · Documenting clinical information in the health record

 Inmate Name:
 ORENA, VICTOR
 Reg #: 07540-085

 Date of Birth:
 08/04/1934
 Sex: M
 Race: WHITE

 Scanned Date:
 03/03/2025 08:55 EST
 Facility: DEV

Cosigned by Churchville, Lawrence MD on 03/03/2025 12:58.

# Orena, Victor

MRN: 520200765

Xiomara Valencia, RRT

Plan of Care 🗘 🛂

Date of Service: 2/28/2025 11:50 AM

**Respiratory Therapist** Specialty: Respiratory Therapy Signed

07540-085

# **RESPIRATORY CARE NOTE**

Pt was placed on highflow following some desaturation episodes on a 10L Oximask. MD @bedside, verbal order given. Pt placed on highflow 45L 60%, tolerating well, sats in the mid 90's.

Xiomara Valencia, RRT

 Inmate Name:
 ORENA, VICTOR
 Reg #: 07540-085

 Date of Birth:
 08/04/1934
 Sex: M
 Race: WHITE

 Scanned Date:
 03/03/2025 08:54 EST
 Facility: DEV

Cosigned by Churchville, Lawrence MD on 03/03/2025 12:59.

3/2/25, 3:45 PM

# Orena, Victor

MRN: 520200765

Ryan C Chua, MD

Discharge Summary 🔬 🖳

Date of Service: 2/28/2025 12:50 PM

Physician **Critical Care**  Signed

0~1540-085

# DISCHARGE SUMMARY **UMASS MEMORIAL HEALTH CARE**

Doc Inc Findings - Fri February 28, 2025

**Row Name** 

Incidental Findings

Hypoxemia, hypotension, CT chest revealing for Mild central venous Incidental Findings

congestion, thickening of the central bronchial walls and diffuse interstitial prominence as above raise the possibility of venous congestion with mild chronic or early pulmonary edema. slightly smaller right pleural effusion when compared to previous.

Deferred to receiving facility

Recommended Follow Up

Instructions:

**DISCHARGE INFORMATION:** 

Date and Time of Admission: 2/27/2025 4:12 PM

Date of Discharge: 2/28/2025

DISCHARGE DIAGNOSIS:

**Problem List** 

Active Problems

\* (Principal) Heart failure with reduced ejection fraction (HCC)

AAA (abdominal aortic aneurysm) without rupture (HCC)

Acute hypoxemic respiratory failure (HCC)

Alzheimer disease (HCC)

HTN (hypertension)

Hypernatremia

Hypokalemia

Type 2 diabetes mellitus (HCC)

Resolved Problems

**RESOLVED:** Hyponatremia

## ATTENDING PHYSICIAN ON DISCHARGE:

Attending Provider: Ryan C Chua, MD 978-798-6900

# FOLLOW-UPS AND SCHEDULED APPOINTMENTS:

No future appointments.

## **PENDING LABS:**

Ordered
CULTURE, BLOOD (Blood Cultures X 2, Peripheral)
Placed in "And" Linked Group
02/28/25 1126
CULTURE, BLOOD (Blood Cultures X 2, Peripheral)
Placed in "And" Linked Group
02/28/25 1126

# **DISCHARGE MEDICATIONS:**

# **Discharge Medication list:**

**Discharge Medications** 

# **New Medications**

	Sig	Disp	Refill
phenylephrine 10 mg/250 mL (40	Infuse 0-419.5 mcg/min	_	0
START mcg/mL)	intravenously Titrated.		
Commonly known as: NEO-	·		•
SYNEPHŘINE			

# **Medications To Continue**

	Sig	Disp	Refill
acetaminophen 325 mg tablet Commonly known as: TYLENOL	Take 650 mg by mouth 3 times a day.		0
aspirin 81 mg EC tablet	Aspirin 81 MG TABS TAKE 1 TABLET DAILY. Refills: 0 Active		
atorvastatin 40 mg tablet Commonly known as: LIPITOR	Take 20 mg by mouth nightly.		0
calcium polycarbophiL 625 mg tablet Commonly known as: FIBERCON	Calcium Polycarbophil 625 MG Oral Tablet 1 TABLET AT BEDTIME Refills: 0		0
cromolyn 4 % ophthalmic solution Commonly known as: OPTICROM	Instill 2 drops into both eyes 4 times a day.		0

	-	Sig	Disp	Refill
	Cymbalta 30 mg capsule Generic drug: DULoxetine DR	Cymbalta 30 MG Oral Capsule Delayed Release Particles TAKE 1 CAPSULE DAILY Quantity: 30; Refills: 0		0
		Active		
	donepeziL 5 mg tablet Commonly known as: ARICEPT	Take 5 mg by mouth every morning.		0
_	DORZOLAMIDE-TIMOLOL OPHTHALMIC	Dorzolamide HCI-Timolol Mal 22.3-6.8 MG/ML Ophthalmic Solution 1 DROP TO BOTH EYES TWICE DAILY Refills: 0		0
<del></del>	ferrous gluconate 324 mg (37.5 mg iron) tablet tablet Commonly known as: FERGON	Take 324 mg by mouth 3 times a week. Mon, wed, & friday		0
	glucose 4 gram chewable tablet	Glucose 4 GM Oral Tablet Chewable Refills: 0		0
		Active		
	* insulin NPH 100 units/mL injection Commonly known as: HumuLIN N,NovoLIN N - 100 units/mL	Inject 22 Units under the skin daily with breakfast.		0
	* insulin NPH 100 units/mL injection Commonly known as: HumuLIN N,NovoLIN N - 100 units/mL	Inject 22 Units under the skin nightly.		. 0
	latanoprost 0.005% ophthalmic solution Commonly known as: XALATAN	Instill 1 drop into both eyes nightly.		0
	lisinopriL 20 mg tablet Commonly known as: PRINIVIL,ZESTRIL	20MG Oral Tablet TAKE 1 TABLET DAILY. Refills: 0		0
		Active, Per facility med sheets taking 20 mg daily		
	memantine 5 mg tablet Commonly known as: NAMENDA	Take 10 mg by mouth 2 times a day.		0
	nystatin 100,000 unit/gram powder Commonly known as: MYCOSTATIN	Apply 1 application, topically to the affected area 3 times a day. To groin area		0
·	POLYVINYL ALCOHOL OPHTHALMIC	Instill 2 drops into both eyes 3 times a day as needed.	_	0

	Sig	Disp	Refill
	Take 0.5 mg by mouth daily as needed (agitation).		0
· · · · · · · · · · · · · · · · · · ·	Take 12.5 mg by mouth once a day.		0
tamsulosin 0.4 mg capsule Commonly known as: FLOMAX	Take 0.4 mg by mouth daily.		0
traZODone 50 mg tablet Commonly known as: DESYREL	Take 50 mg by mouth nightly.		0

# There are duplicate medications prescribed to the patient

# **Stopped Medications**

moxicillin-clavulanate 875-125 mg tablet STOP-ommonly known as: AUGMENTIN

salcium carbonate 200 mg calcium (500 mg) chewable tablet S102 ommonly known as: TUMS

sholecalciferol 1,250 mcg (50,000 unit) capsule S102 ommonly known as: VITAMIN D3

sitalopram 10 mg tablet STOR ommonly known as: CeleXA

clotrimazole 1% cream

\$10R ommonly known as: LOTRIMIN

Store on the store of the store

oxazosin 2 mg tablet

STOR ommonly known as: CARDURA

STOR ommonly known as: VIBRAMYCIN

store furosemide 20 mg tablet STOre ommonly known as: LASIX

Stort ommonly known as: MOTRIN

insulin regular 100 units/mL injection STOPCommonly known as: HumuLIN R,NovoLIN R - 100 units/mL

STOP study drug from outside facility

metFORMIN 1,000 mg tablet

STOR ommonly known as: GLUCOPHAGE

NovoLOG U-100 Insulin aspart 100 units/mL injection

STOR3 eneric drug: insulin aspart U-100

Plavix 75 mg tablet

STOR eneric drug: clopidogreL

**S10R** ommonly known as: ZANTAC

senna 8.6 mg tablet

STOR ommonly known as: SENOKOT

VNABLE TO FIND: MISCELLANEOUS CLINIC ADMINISTERED MEDICATION STOP

store eneric drug: cyanocobalamin

#### **ALLERGIES:**

Topamax [topiramate]

## **IMMUNIZATION HISTORY:**

There is no immunization history on file for this patient.

# PRESENTATION INFORMATION: HISTORY OF PRESENT ILLNESS:

#### **PAST MEDICAL HISTORY:**

Past Medical History:

Diagnosis

Acute hypoxemic respiratory failure (HCC)

Alzheimer disease (HCC)

- Anemia
- Diabetes mellitus (HCC)
- Glaucoma
- Hypertension

#### **PAST SURGICAL HISTORY:**

Past Surgical History:

Procedure

ABDOMINAL AORTIC ANEURYSM REPAIR

Laterality

Date

Date

02/28/2025

- CARDIAC ELECTROPHYSIOLOGY PROCEDURE
   N/A
   4/26/2018
   Procedure: Generator extraction; Surgeon: Robert M Hayward Jr., MD; Location: UNV Heart Vasc Int Lab; Service:
- PR REANEURYSM/GRFT INS,ABDOMINAL AORTA
   N/A
   6/24/2019

   Procedure: RÉPAIR OF ABDOMINAL AORTIC ANEURYSM USING GRAFT; Surgeon: Elias J Arous, MD;
   Location: UNV OR; Service: Vascular

## **PAST FAMILY HISTORY:**

No family history on file.

#### PAST SOCIAL HISTORY:

Social History<sup>[1]</sup>

#### **HOSPITAL COURSE:**

ED evaluation revealed blood pressure of 136/60, heart rate of 71, saturating 94% on 4 L nasal cannula. He was tachypneic on exam. Blood work showed CBC of hemoglobin 10.7, BNP elevated to 4300 similar to prior, BMP was done which showed sodium 146 and K of three 2.5. Troponin high-sensitivity were elevated at 63 and 66. VBG showed CO2 retention.

He received lasix 40 IV x2. Has poor UO. Worsening hypoxemia. O2 needs increasing to 10L.

CT chest done showed mild central venous congestion, thickening of the central bronchial walls and diffuse interstitial prominence as above raise the possibility of venous congestion with mild chronic or early pulmonary edema.

Foley catheter was placed. Urine output is not improving. Plavix was held transiently for possible thoracentesis.

Systolic blood pressure had also decreased to mid 80s. Patient started on Neo-Synephrine for blood pressure support. Plan to reassess. Communicated to receiving facility. May eventually need central access.

# DISCHARGE DAY INFORMATION: DISCHARGE PHYSICAL EXAM:

Vital signs: Blood pressure 102/58, pulse 64, temperature 36.5 °C (97.7 °F), temperature source Oral, resp. rate (1)

21, SpO2 96%.

General appearance: Somnolent HEENT: Normocephalic, atraumatic Pupils are equal, round and react to light

Nonicteric Neck: Supple

Back: No CVA tenderness

Lungs: diminished at the bases with rales

Breasts / Chest: Shape and Excursion: Normal shape and Normal excursion

Heart: Rate and Rhythm: regular Abdomen: Soft, non-tender throughout Extremities: Normal range of motion

Skin: No rash or ulcers

Neurologic: Somnolent arousable

### LAB AND RADIOLOGY:

LABS:

Pertinent labs include

## **IMAGING:**

Pertinent Imaging results include

### **GLOBAL PLAN OF CARE**

#### CONSULTS:

IP CONSULT TO CARDIOLOGY IP CONSULT TO PULMONOLOGY

#### **PROCEDURES:**

## **QUALITY**

Urethral Catheter: Monitor Hourly Output Telemetry: Reason for telemetry monitoring is acute heart failure

**CONDITION: Serious** 

ADVANCED CARE PLANNING

Code Status: Full Code

**Medical Decision Maker:** 

I spent 106 minutes performing discharge day services (e.g. examination, discussion of hospital course, follow up care and planning) as appropriate

Signature:

Ryan C Chua, MD

Electronic Signature

[1]

### Social History

Socioeconomic History

Marital status:

Spouse name:

Number of children:

Years of education:

Highest education level:

Occupational History

Not on file

Tobacco Use

Smoking status:

Smokeless tobacco:

Tobacco comments:

Substance and Sexual Activity

 Alcohol use: Drug-use:

Sexual activity:

Other Topics

Not on file

Social History Narrative

Not on file

Single

Not on file

Not on file

Not on file

Not on file

Former Never

Not Currently **Not Currently** 

Defer Concern

 Inmate Name:
 ORENA, VICTOR
 Reg #:
 07540-085

 Date of Birth:
 08/04/1934
 Sex:
 M
 Race:
 WHITE

 Scanned Date:
 03/03/2025 08:53 EST
 Facility:
 DEV

Cosigned by Churchville, Lawrence MD on 03/04/2025 15:46.

# Orena, Victor

MRN: 520200765

Suraj Rao, MD

Progress Notes 🗘 🖳

Date of Service: 2/28/2025 8:00 AM

Physician

Addendum

Hospital Medicine

07580-085

### PROGRESS NOTE

## **HISTORY OF PRESENT ILLNESS:**

Patient is a 90-year-old male with a history of CHF, Alzheimer's disease, anemia, diabetes mellitus, presents from prison facility he is on 2 L of oxygen at baseline but this is unclear as patient has dementia. He was apparently put on 4 L and saturating at 93%. History is fairly unreliable as patient has dementia. He thinks that he is from Long Island.

Recent admission at Tufts Medical Center for bilateral pleural effusions that were found and had to be drained. He was also found to have a pneumothorax after that. He had Legionella pneumonia and was treated for this at that time. What prompted this admission was that he was felt like he was short of breath again.

ED evaluation revealed blood pressure of 136/60, heart rate of 71, saturating 94% on 4 L nasal cannula. He was tachypneic on exam. Blood work showed CBC of hemoglobin 10.7, BNP elevated to 4300 similar to prior, BMP was done which showed sodium 146 and K of three 2.5. Troponin high-sensitivity were elevated at 63 and 66. VBG showed CO2 retention.

#### SUBJECTIVE:

Initially was planned for discharge today but patient developed worsening hypoxia and worsening clinical status. Upon evaluation, patient has persistent crackles, increased oxygen requirements of up to 10 L nasal cannula. ICU attending notified and patient will be transferred to ICU level of care. He has also not put out much urine since last night.

Review of systems: All other systems were reviewed and were negative.

## **OBJECTIVE:**

### VITAL SIGNS FOR PAST 24 Hours ([High] [Low] (Last Recorded Value)):

Vitals:

02/28/25 1345

BP:

129/75

Pulse:

65

Resp:

(1) 23

Temp:

SpO2:

98%

#### I/Os LAST 24 HOURS:

Intake/Output Summary (Last 24 hours) at 3/1/2025 0833 Last data filed at 2/28/2025 1218

Gross per 24 hour

Intake

150 ml

Output **Net** 

-150 ml

# PHYSICAL EXAM:

GENERAL: The patient is awake, ill-appearing, unable to assess orientation due to dementia HEENT: Pupils are equal and reactive. No pallor or icterus.

HEART: S1, S2 heard.

LUNGS: Crackles present bilaterally. On 10 L nasal cannula OxyMask

ABDOMEN: Soft, nontender, nondistended. Bowel sounds heard. No hepatosplenomegaly.

EXTREMITIES: No cyanosis, clubbing, or edema.

NEURO: Unable to fully assess due to acuity of condition

PSYCH: Unable to assess due to acuity of condition

# **MEDICATIONS:**

Scheduled Meds:

Continuous Infusions:No current facility-administered medications for this encounter.

PRN Meds:.

## LAB:

Recent Results (from the past 24 hours)

**Basic Metabolic Panel** 

Collection Time: 02/28/25 9:10 AM Specimen: Venous, Peripheral; Blood

Res	sult	Value	Ref Range
	NA	141	135 - 145
			mmol/L
	K	3.5	3.5 <b>-</b> 5.3
			mmol/L
	CI	100	98 - 107
			mmol/L
	CO2	29	22 - 32
			mmol/L
	BUN	14	7 - 23 mg/dL
	Creatinine,	1.14	0.60 - 1.30
			mg/dL
	Glucose	253 (H)	65 - 99
			mg/dL
	Calcium	8.8	8.6 - 10.5
	•		mg/dL
	Anion Gap	12	5 - 15
	eGFR	61	>=60
			mL/min/1.73
			m2

#### **CBC** Auto Differential

Collection Time: 02/28/25 9:10 AM Specimen: Venous, Peripheral; Blood

Result	Value	Ref Range
WBC	7.5	3.8 - 10.8
		10*3/uL
RBC ·	4.19 (L)	4.20 - 5.80
		10*6/uL
Hemoglobin	11.6 (L)	13.2 - 17.1
_		g/dL
Hematocrit	38.1 (L)	38.5 - 50.0
	• •	%
MCV	90.9	80.0 - 100.0
		fL
MCH	27.7	27.0 - 33.0
		pg ·
MCHC	30.4 (L)	32.0 - 36.0
	• • •	g/dL
RDW	15.2 (H)	11.0 - 15.0 %
Platelets	213 ` ´	140 - 400
		10*3/uL
MPV	10.1	7.5 - 12.5 fL
Neutrophil %	84,0	%
Immature Grans %	0.4	0.0 - 0.9 %
Lymphocyte %	8.6	%
Monocyte %	5.9	%

Eosinophil %	0.4	%
Basophil %	0.7	%
Neutrophil #	6.27	1.50 - 7.80
•		10*3/uL
Immature Grans #	0.03	<=0.03
		10*3/uL
Lymphocyte #	0.60 (L)	0.85 - 3.90
• • •		10*3/uL
Monocyte #	0.40	0.20 - 0.95
•		10*3/uL
Eosinophil #	<0.03	0.02 - 0.50
•		10*3/uL
Basophil#	0.10	0.00 - 0.20
		10*3/uL
nRBC %	0.0	/100 WBCs
nRBC#	<0.01	<0.01
•		10*3/uL
OCT Glucose, interfaced		

PC

Collection Time: 02/28/25 11:35 AM

Ref Range Result Value 70 - 99 Glucose, POCT 160 (H) mg/dL

## **IMAGES:**

XR Chest Portable 1 View Result Date: 2/28/2025

EXAMINATION/TECHNIQUE: XR CHEST PORTABLE 1 VIEW: INDICATION: Hypoxia COMPARISON: Chest radiograph 1/18/2025 1/17/2025, 6/26/2019; CT chest 1/17/2025 FINDINGS: The patient is rotated to the left. Lines/Tubes/Devices: Right pectoral pacemaker with leads terminating in the right atrium and right ventricle. Abandoned left pectoral pacemaker leads terminating in the right atrium and right ventricle. Lungs: Low lung volumes. Diffuse reticular opacity similar to prior. No definite consolidation. Pleura: Moderate right pleural effusion. Small left pleural effusion. No pneumothorax. Heart and Mediastinum: The cardiac and mediastinal contours are enlarged, essentially unchanged; evaluation is limited due to effusions and patient positioning. Bones: No acute osseous abnormality.

Cardiomegaly with pulmonary edema and moderate right and small left pleural effusions. I, Hemang Kotecha, have reviewed the examination and concur with the findings as reported or so edited. Trainee: Eric Schmidt If this radiology report contains a blank impression section, it is an incomplete radiology report. Please contact the interpreting radiologist or applicable radiology division as soon as possible to obtain the Workstation ID: LS1RADW02E completed interpretation.

**CT Chest W Contrast** Result Date: 2/27/2025

INDICATION: prior effusions/SOB area per clinical record: "90-year-old with history of CHF who is reportedly from the facility not on any oxygen but prior notes that he is on 2 L of oxygen at baseline but given his presenting who has history of dementia who was found to be 88% on room air this morning and only mildly improved with put on 2 L and was escalated to 4 L but he improved to 93%. Patient was recently seen here in January and was having similar symptoms at that time was found to have bilateral pleural effusions with questionable pneumonia versus pulmonary edema was given Lasix and treated for his pneumonia. He had a VBG done at that time that showed that he had acidosis but that he was not retaining any CO2 the decision was made to put him on high flow since he was not able to tolerate BiPAP due to his mental status with his dementia. He eventually was transferred to Tufts Medical Center for the bilateral pleural effusions that were found. There he had drainage of his effusions and was found to have a pneumothorax afterwards was treated with chest tube also was noted to have Legionella pneumonia and was treated for this.. The present is not able provide me any further information as to what ultimately happened with that. But he was logical at the present was doing well. And they state now that he feels like he has been short of breath again. Here the patient wakes up and is able to answer all my questions and have a full discussion with me. States that he does not have any acute complaints but does feel short of breath if he tries to get up and move around. He denies any abdominal pain any chest pain any nausea vomiting any urinary symptoms." EXAMINATION: CONTRAST ENHANCED CT OF THE CHEST: TECHNIQUE: Axial images were acquired from the thoracic inlet through the upper abdomen following the introduction of IV contrast. Coronal and sagittal reconstructions of the axial data were constructed for review. COMPARISONS: 1/17/2025 FINDINGS: LUNGS: Stable calcified left lingular nodule. Diffuse interstitial prominence with thickening of the interlobular septae throughout. Central vasculature appear mildly prominent especially in the upper lung zones and there is central and mid peripheral thickening of the bronchial markings. Findings raise the possibility of mild or early pulmonary edema. Mild relaxation atelectasis is seen at the right base, otherwise the airspace is clear. PLEURAL SPACE: The pleural space demonstrates no evidence for pneumothorax. A small layering right pneumothorax is noted, stable or slightly smaller than on previous examination. There are no masses appreciated. VESSELS: The aorta demonstrates normal course and contour. The vena cava demonstrates normal course and contour. The pulmonary arteries enhance normally and demonstrate normal configuration. HEART AND MEDIASTINUM: The heart demonstrates grossly normal appearance on this noncardiac gated examination. The pericardium is unremarkable. The trachea and central bronchi are unremarkable. THORACIC WALL AND SPINE: Ribs demonstrate normal architecture and density. The sternum is unremarkable. The thoracic spine demonstrates normal density and vertebral architecture. There is normal alignment with normal thoracic kyphosis. \*

Mild central venous congestion, thickening of the central bronchial walls and diffuse interstitial prominence as above raise the possibility of venous congestion with mild chronic or early pulmonary edema. Stable or slightly smaller right pleural effusion when compared to previous. If this radiology report contains a blank impression section, it is an incomplete radiology report. Please contact the interpreting radiologist or applicable radiology division as soon as possible to obtain the completed interpretation. Workstation ID: FS1HPACSW31 Up-to-date CT equipment and radiation dose reduction techniques were employed. CTDIvol: 21.4 mGy. DLP: 748 mGy-cm.

#### ASSESSMENT AND PLAN:

Principal Problem:

Heart failure with reduced ejection fraction (HCC)

Active Problems:

AAA (abdominal aortic aneurysm) without rupture (HCC)

HTN (hypertension)

Alzheimer disease (HCC)

Hypokalemia

Hypernatremia

Type 2 diabetes mellitus (HCC)

Acute hypoxemic respiratory failure (HCC)

**CHF** exacerbation

Possible cardiogenic shock

Acute hypoxic respiratory failure status post AICD

NSTEM!, likely type II due to demand ischemia

I called the present facility and he is not oxygen dependent at home

He is currently on 4 L nasal cannula, requires up to 10 L nasal cannula at my time of evaluation.

Blood pressure is low at 76/43 on reassessment this morning

Echocardiogram from Tufts medicine in 1/2025 shows EF of 30 to 35% with moderate global hypokinesis of left ventricle.

BNP is elevated at 4376 and troponin elevations at 63 and 66.

He recently had to get pleural effusions drained at Tufts Medical Center

Chest x-ray done today shows persistent right-sided pleural effusion

Continue Lasix 40 mg IV twice daily

He has poor urine output and has not been on much

Cardiology consult is currently pending, recommended continuation of diuresis

Due to increased oxygen requirements, persistent hypotension, transfer to ICU

#### 3/2/25, 3:37 PM

Likely in the setting of poor oral intake Continue to encourage oral intake Avoid IV fluids due to CHF exacerbation

# Hypokalemia

This is pleated yesterday and potassium resolved today

Hypertension Continue Lasix., lisinopril

Dementia Continue donezepil, memantine, Cymbalta Risperdal as needed for agitation

Type 2 diabetes mellitus
Continue NPH insulin daily and nightly with insulin sliding scale

#### **BPH**

Continue tamsulosin

Known history of AAA status postrepair Stable at this time

# GLOBAL PLAN OF CARE FLUIDS AND NUTRITION

FLUIDS:

NUTRITION: No diet orders on file

#### **QUALITY**

Urethral Catheter: Severe Desaturation with movement/Do not Turn Order

### **VTE PROPHYLAXIS**

Pharmacologic Prophylaxis: n/a Mechanical Prophylaxis: n/a

#### ADVANCED CARE PLANNING

Code Status: Prior

**Medical Decision Maker:** 

I spent a total of 70 minutes on the date of encounter, which included:

- · Critical care assessing patient at bedside, speaking with intensivist and coordinating care preparing to see the patient (e.g., review of test results)
- Obtaining and/or reviewing separately obtained history
- · Performing a medically appropriate exam and/or evaluation
- · Counseling and educating the patient/family/caregiver
- · Ordering medications, tests, procedures
- Referring and communicating with other healthcare professionals, when not separately reported
- · Documenting clinical information in the health record

### Signature:

Suraj Rao, MD

Electronic Signature

Dispo - Patient will stay in the hospital, transfer to ICU

 Inmate Name:
 ORENA, VICTOR
 Reg #: 07540-085

 Date of Birth:
 08/04/1934
 Sex: M
 Race: WHITE

 Scanned Date:
 03/03/2025 08:51 EST
 Facility: DEV

Cosigned by Churchville, Lawrence MD on 03/03/2025 12:59.

3/2/25, 3:38 PM

Orena, Victor

MRN: 520200765

07540-08.

Ryan C Chua, MD

Consults 🗘 🖳

Signed

Date of Service: 2/28/2025 11:27 AM

Physician-

Critical Care

**Initial Pulmonary Consult Note** 

CONSULTS

REQUESTED BY: Dr Rao REASON FOR CONSULT:

Shock

HPI -

**HISTORY OF PRESENT ILLNESS**: History obtained from: Patient and Medical Record Victor Orena is a 90 year old with a history of CHF, Alzheimer's disease, anemia, diabetes mellitus, presents from prison facility he is on 2 L of oxygen at baseline. He was apparently put on 4 L and saturating at 93%. History is fairly unreliable as patient has dementia.

Recent admission at Tufts Medical Center for bilateral pleural effusions that were found and had to be drained. He was also found to have a pneumothorax after that. He had Legionella pneumonia and was treated for this at that time.

ED evaluation revealed blood pressure of 136/60, heart rate of 71, saturating 94% on 4 L nasal cannula. He was tachypneic on exam. Blood work showed CBC of hemoglobin 10.7, BNP elevated to 4300 similar to prior, BMP was done which showed sodium 146 and K of three 2.5. Troponin high-sensitivity were elevated at 63 and 66. VBG showed CO2 retention.

He received lasix 40 IV x2. Has poor UO. Worsening hypoxemia. O2 needs increasing to 10L.

CT chest done showed mild central venous congestion, thickening of the central bronchial walls and diffuse interstitial prominence as above raise the possibility of venous congestion with mild chronic or early pulmonary edema.

Subjective -

#### **REVIEW OF SYSTEMS:**

Unable to perform review of systems. Reasons: shortness of breath

Past Medical History:

Alzheimer disease (HCC) Anemia Diabetes mellitus (HCC) Glaucoma Hypertension

**Past Surgical History:** 

ABDOMINAL AORTIC ANEURYSM REPAIR CARDIAC ELECTROPHYSIOLOGY PROCEDURE; N/A PR REANEURYSM/GRFT INS,ABDOMINAL AORTA; N/A

Medications

**Current Medications:** 

# Current Medications<sup>[1]</sup>

# Allergies:

Topamax [Topiramate]

## **Social History:**

Tobacco Use

Smoking status: FormerSmokeless tobacco: Never

Tobacco comments:

# Substance Use Topics

Alcohol use: Not Currently
 Drug use: Not Currently

### Family History:

No family history on file.

# Objective -

Temp: [36.5 °C (97.7 °F)-36.7 °C (98.1 °F)] 36.5 °C (97.7 °F)

Heart Rate: [61-93] 71 Resp: [22-34] 25

BP: (85-165)/(48-107) 85/48 SpO2: [89 %-98 %] 89 %

# **Physical Exam**

General appearance: Somnolent HEENT: Normocephalic, atraumatic Pupils are equal, round and react to light

Nonicteric Neck: Supple

Back: No CVA tenderness

Lungs: diminished at the bases with rales

Breasts / Chest: Shape and Excursion: Normal shape and Normal excursion

Heart: Rate and Rhythm: regular Abdomen: Soft, non-tender throughout Extremities: Normal range of motion

Skin: No rash or ulcers

Neurologic: Somnolent arousable

# **Result Review**

Reviewed medical documentation from the following services:

		2/28/2025
	Latest Ref Rng & Units	9:10 AM
CBC		
WBC	3.8 - 10.8 10*3/uL	7.5
Hgb	13.2 - 17.1 g/dL	11.6 ❤
Hct	38.5 - 50.0 %	38.1 ❤
MCV	80.0 - 100.0 fL	90.9
Pits	140 - 400 10*3/uL	213
		2/28/2025
	Latest Ref Rng & Units	9:10 AM
Basic Metabolic Panel	_	
Sodium	135 - 145 mmol/L	141

	Latest Ref Rng & Units	2/28/2025 9:10 AM
Potassium	3.5 - 5.3 mmol/L	3.5
Chloride	98 - 107 mmol/L	100
Carbon Dioxide	22 - 32 mmol/L	29
Glucose	65 - 99 mg/dL	253 ^
Creatinine	0.60 - 1.30 mg/dL	1.14
Calcium	8.6 - 10.5 mg/dL	8.8
EGFR	>=60 mL/min/1.73m2	61

# **Imaging / Procedures**

# Assessment & Plan -

Principal Problem:

Heart failure (HCC)

Active Problems:

AAA (abdominal aortic aneurysm) without rupture (HCC)

HTN (hypertension)

Alzheimer disease (HCC)

Hypokalemia

Hypernatremia

Type 2 diabetes mellitus (HCC)

# Acute hypoxic respiratory failure

- -On 10 L of O2 via oxime mask
- -Saturating adequately
- -Due to heart failure and pleural effusions

## Heart failure with reduced EF

Known history of coronary artery disease status post DES to mid LAD 2022

AV block status post PPM

AAA status post repair 2019

- -Acute systolic CHF -known EF from January 2025 of 30 to 35% with moderate global hypokinesis
- -Mild troponin elevation
- -Admission BNP of 4376
- -Continue aspirin
- -Will hold Plavix for possible thoracentesis
- -Lipitor 20

## Hypotension

- -Likely in setting of diuresis
- -Labs do not reveal any leukocytosis
- -Plan to start vasopressor support
- -PICC line request

# Hyponatremia

## Hypokalemia

-Replete as needed

## Poor urine output

- -Labs do not reveal any creatinine elevation
- -Insert Foley catheter

Type 2 diabetes

- -Metformin 1000 twice daily
- -Usually on NPH 22 twice daily at breakfast and nightly
- -Hospital sliding scale

History of stroke and Alzheimer's

Neuro/psych

- -Continues on Celexa
- -Donepezil 5 mg a.m.
- -Namenda 10 mg twice daily
- -Risperidone 0.5 daily
- -Trazodone 50 at night

GI

History of dysphagia

- -Senna 2 tabs daily
- -Zantac 150 twice a day

Ophthalmic

Continue with dorzolamide-timolol ophthalmic solution 1 drop to both eyes twice a day

# **GLOBAL PLAN OF CARE:**

I have discussed the plan of care with: Inter-professional team.

Critical care time devoted to patient care 60 minutes.

Ryan Chua, MD

- [1] acetaminophen (TYLENOL) tablet 650 mg, 650 mg, oral, q4h PRN
- aspirin EC tablet 81 mg, 81 mg, oral, Daily
- atorvastatin (LIPITOR) tablet 20 mg, 20 mg, oral, Nightly
- calcium polycarbophiL (FIBERCON) tablet 625 mg, 625 mg, oral, Nightly
- clopidogreL (PLAVIX) tablet 75 mg, 75 mg, oral, Daily
- dextrose (GLUTOSE) gel 15 g, 15 g, oral, q15min PRN \*\*OR\*\* dextrose (D50W) IV injection 12.5 g, 12.5 g, intravenous, q15min PRN \*\*OR\*\* dextrose (D50W) IV injection 25 g, 25 g, intravenous, q15min PRN \*\*OR\*\* glucagon (GLUCAGEN) injection 1 mg, 1 mg, subcutaneous, q15min PRN
- donepeziL (ARICEPT) tablet 5 mg, 5 mg, oral, Nightly
- DULoxetine DR (CYMBALTA) capsule 30 mg, 30 mg, oral, Daily
- enoxaparin (LOVENOX) subcutaneous injection 40 mg, 40 mg, subcutaneous, Daily
- furosemide (LASIX) injection 40 mg, 40 mg, intravenous, 2x daily
- insulin lispro (ADMELOG/HumaLOG 100 units/mL) injection 1-5 Units, 1-5 Units, subcutaneous, 3x daily with meals
- insulin NPH (HumuLIN N,NovoLIN N 100 units/mL) injection 22 Units, 22 Units, subcutaneous, Daily with breakfast
- insulin NPH (HumuLIN N, NovoLIN N 100 units/mL) injection 22 Units, 22 Units, subcutaneous, Nightly
- lisinopriL (PRINIVIL,ZESTRIL) tablet 20 mg, 20 mg, oral, Daily
- memantine (NAMENDA) tablet 10 mg, 10 mg, oral, 2x daily
- ondansetron (ZOFRAN) injection 4 mg, 4 mg, intravenous, q8h PRN
- phenylephrine (NEO-SÝNÉPHRINE) 10 mg in 0.9% NaCl 250 mL premix infusion, 0-5 mcg/kg/min, intravenous, Titrated
- risperiDONE (RisperDAL) tablet 0.5 mg, 0.5 mg, oral, Daily PRN
- senna (SENOKOT) tablet 17.2 mg, 17.2 mg, oral, Nightly PRN
- IV Peripheral Line Care, , , Until discontinued \*\*AND\*\* sodium chloride 0.9% flush 2.5-10 mL, 2.5-10 mL,

intravenous, See admin instructions \*\*AND\*\* sodium chloride 0.9% flush 2.5-10 mL, 2.5-10 mL, intravenous, q12h SCH

- spironolactone (ALDACTONE) split tablet 12.5 mg, 12.5 mg, oral, Daily
  tamsulosin (FLOMAX) capsule 0.4 mg, 0.4 mg, oral, Daily

 Inmate Name:
 ORENA, VICTOR
 Reg #: 07540-085

 Date of Birth:
 08/04/1934
 Sex: M
 Race: WHITE

 Scanned Date:
 03/03/2025 08:50 EST
 Facility: DEV

Cosigned by Churchville, Lawrence MD on 03/03/2025 12:57.

# Orena, Victor

MRN: 520200765 Lecoinstec

Michael Joseph Bernazzani, MD

ED Provider Notes 🗘 🖳

Date of Service: 2/27/2025 12:25 PM

Resident

**Emergency Medicine** 

Attestation signed by Maurine J. Williams, MD at 3/2/2025 8:40 AM

Attested

Attending to Resident/Fellow - I saw and evaluated the patient. I discussed the case with the resident(s)/fellow(s) and agree with the findings and plan as documented by the resident(s)/fellow(s). Key elements, clarifications and/or exceptions are noted by me.

Victor Orena DOB: 8/4/1934 MRN: 520200765 CSN: 12187152104

# History

HPI:

**Chief Complaint** 

Patient presents with

SOB

HPI See HPI

## **Patient History**

### Past Medical History:

Diagnosis

Alzheimer disease (HCC)

- Anemia
- Diabetes mellitus (HCC)
- Glaucoma
- Hypertension

### Past Surgical History:

Procedure

Laterality

Date

Date

- ABDOMINAL AORTIC ANEURYSM REPAIR
- CARDIAC ELECTROPHYSIOLOGY PROCEDURE
   N/A
   4/26/2018
   Procedure: Generator extraction; Surgeon: Robert M Hayward Jr., MD; Location: UNV Heart Vasc Int Lab; Service:
- PR REANEURYSM/GRFT INS,ABDOMINAL AORTA
   N/A
   6/24/2019

   Procedure: REPAIR OF ABDOMINAL AORTIC ANEURYSM USING GRAFT; Surgeon: Elias J Arous, MD;
   Location: UNV OR; Service: Vascular

No family history on file.

# Social History

Tobacco Use

Smoking status:

Former

3/2/25, 3:36 PM

Orena, Victor (MRN 520200765) DOB: 08/04/1934 Encounter Date: 02/27/2025

· Smokeless tobacco:

Never

Tobacco comments:

Substance Use Topics

 Alcohol use: Drug use:

Not Currently **Not Currently** 

Sexuality and Gender Identity

Sexuality

Legal Information Legal first name: Victor Legal last name: Orena Legal sex: Male

Gender Identity

Patient's sex assigned at birth: Male

Organ Inventory

Organs the has:

Organs present at birth patient currently or expected at birth to develop:

Organs surgically enhanced or constructed:

Organs hormonally enhanced or developed:

breasts cervix ovaries uterus vagina

penis prostate testes

Review of Systems -

**REVIEW OF SYSTEMS:** 

See HPI

Physical Exam

Physical Exam ·

Temp

(97.9 °F)

ED Triage Vitals [02/27/25 1244] Heart

Rate

Resp

BP

SpO2

36.6 °C

61

(!) 22

159/87

97 %

Temp src Heart

Rate

Patient Position BP Location

Set FiO2 (02%)

3/2/25, 3:36 PM

Source Monitor

Lying

Left arm -

Physical Exam See MDM

# Medical Decision Making and ED Course

#### MDM

This is a 90-year-old with history of CHF who is reportedly from the facility not on any oxygen but prior notes that he is on 2 L of oxygen at baseline but given his presenting who has history of dementia who was found to be 88% on room air this morning and only mildly improved with put on 2 L and was escalated to 4 L but he improved to 93%. Patient was recently seen here in January and was having similar symptoms at that time was found to have bilateral pleural effusions with questionable pneumonia versus pulmonary edema was given Lasix and treated for his pneumonia. He had a VBG done at that time that showed that he had acidosis but that he was not retaining any CO2 the decision was made to put him on high flow since he was not able to tolerate BiPAP due to his mental status with his dementia. He eventually was transferred to Tufts Medical Center for the bilateral pleural effusions that were found. There he had drainage of his effusions and was found to have a pneumothorax afterwards was treated with chest tube also was noted to have Legionella pneumonia and was treated for this.. The present is not able provide me any further information as to what ultimately happened with that. But he was logical at the present was doing well. And they state now that he feels like he has been short of breath again. Here the patient wakes up and is able to answer all my questions and have a full discussion with me. States that he does not have any acute complaints but does feel short of breath if he tries to get up and move around. He denies any abdominal pain any chest pain any nausea vomiting any urinary symptoms.

On exam the patient has bilateral rhonchi in the lower and upper lung regions he has only 1+ pitting edema up to the knee and his abdomen is mildly distended but soft without any rebound or guarding. He is alert and able to carry a full discussion. He has no obvious neurodeficits. He has 5 out of 5 strength bilateral upper and lower extremities.

His differential diagnosis includes CHF exacerbation versus pneumonia versus reoccurrence of his pleural fluid or ACS. Will plan to get a workup for heart failure as the patient has bilateral crackles on exam along with ACS workup. He will most likely require admission either ICU or floor depending on what his workup shows. His EKG shows that he has a paced rhythm without any acute signs of ischemia. Will plan to get a chest x-ray here today. Will get a VBG to assess his hypercarbia status and I favor a diagnosis of CHF still but since he has been mildly confused and is difficult to decipher his dementia from hypercarbia we will plan to check this.

Patient's labs show that he has a troponin of 63 this is similar to his prior admission here where he was in the 65's his BMP shows that he has hypernatremia with hypokalemia we will plan to give him potassium. And his BNP is elevated to 4000. He is COVID-negative and his CBC is stable his VBG is pending and we will wait to see what his chest x-ray shows.

Patient's workup shows that his VBG does not show any signs of chronic hyper Mia or hypercapnia at this time. His chest x-ray shows that he has possible pulmonary edema versus pleural effusion so I elected to get a CT scan of his chest which did demonstrate that he has continued pulmonary edema and that his pleural effusion was smaller than usual. Given the fact that his VBG is stable and his CT scan shows that he has pulmonary edema with a smaller than usual pleural effusion we will plan to admit him here to the hospital for further workup and treatment. He can see pulm as an inpatient for further drainage if needed. He has an elevated BNP and tropes that have been flat around his baseline of 63 and 65. Patient was accepted the hospital for admission

**ED Course** as of 02/27/25 1654

Thu Feb 27, 2025

1519 Venous Blood Gas (VBG)(!)

No acidotic will CT with 4L NC [MB]

**ED Course User Index** 

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Michael Joseph Bernazzani, MD Resident 02/27/25 1656

Cosigned by: Maurine J. Williams, MD at 3/2/2025 8:40 AM

 Inmate Name:
 ORENA, VICTOR
 Reg #:
 07540-085

 Date of Birth:
 08/04/1934
 Sex:
 M
 Race:
 WHITE

 Scanned Date:
 03/03/2025 08:42 EST
 Facility:
 DEV

Cosigned by Churchville, Lawrence MD on 03/04/2025 15:45.